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MISSOURI
DIVISION OF FAMILY SERVICES
FOURTH ANNUAL REPORT

FISCAL YEAR 1977-1978

* *

DEPARTMENT OF SOCIAL SERVICES

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STATE OF MISSOURI
DEPARTMENT OF SOCIAL SERVICES
DIVISION OF FAMILY SERVICES

DAVID R. FREEMAN, DIRECTOR
DEPARTMENT OF SOCIAL SERVICES

JOHN ZUMWALT, DIRECTOR
DIVISION OF FAMILY SERVICES

ADULT SUPPLEMENTATION
AID TO DEPENDENT CHILDREN
GENERAL RELIEF
AID TO THE BLIND
BLIND PENSION
MEDICAID
SOCIAL SERVICES
CHILD WELFARE SERVICES
SERVICES TO THE BLIND
FOOD STAMP PROGRAM
CHILDREN'S RESIDENTIAL AND
DAY CARE LICENSING
SUPPORT ENFORCEMENT UNIT

P.O. BOX 88
BROADWAY STATE OFFICE BUILDING
JEFFERSON CITY, MISSOURI 65103

Honorable Joseph P. Teasdale
Governor of Missouri
State Capitol
Jefferson City, Missouri

Dear Governor Teasdale:

I am submitting the Fourth Annual Report of the Division of Family Services, covering the activities of the Division during the fiscal year, July 1, 1977-June 30, 1978.

Sincerely,

Phyllis J. Reser
Director

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Prepared by
Research and Statistics

PART I

REVIEW OF THE YEAR

During fiscal year 1977-78, Missouri's total welfare caseload decreased dramatically. The average monthly number of recipients receiving cash benefits during the year was 267,274, a decrease of 62,626 persons (19.0 per cent) from the prior fiscal year. This marked the fifth consecutive year in which the welfare caseload receiving cash benefits has declined.

The primary reason for the decline in this year was the change made in determining eligibility for the Aid to Families with Dependent Children program. Termed "Percentage of Need", the new system had far-reaching effects on Aid to Families with Dependent Children recipients.

Missouri's welfare recipient count in June 1978 was 254,614, a decrease of 62,493 persons or 19.7 per cent from June 1977. Aid to Families with Dependent Children (AFDC) decreased 54,736 (-21.2 per cent); General Relief decreased 2,120 (-31.1 per cent); Supplemental Security Income-Supplemental Payments (SSI-SP) decreased 3,913 (-12.4 per cent); Supplemental payments (SP only) decreased 1,560 (-14.5 per cent); Nursing Care (NC) decreased 49 (-0.6 per cent); Supplemental Aid to the Blind (ABS) decreased 136 (-14.5 per cent); and Blind Pension (BP), the only cash program to show an increase, increased 21 (8.4 per cent).

AFDC is the largest of Missouri's welfare programs. Comparative data for the last five years shows that the AFDC caseload in June 1973 was 219,309 persons. The June 1978 AFDC caseload of 203,803 shows a decline of 15,506 persons (-7.1 per cent).

While the welfare caseload was decreasing there was also a decrease in total expenditures. During the 1977-78 fiscal year total cash assistance payments amounted to $180.2 million in state and federal funds exclusive of medical vendor payments and administrative costs. Compared with the previous fiscal year this represented a decrease of $2.5 million or 1.4 per cent. Of the total assistance payments, the largest expenditure was for AFDC, totaling $140.3 million or 77.8 per cent of total costs, followed by Nursing Care, whose expenditures totaled $18.9 million or 10.5 per cent of total costs. Costs for the remaining programs were as follows: SSI-SP $10,382,778; SP only $5,319,213; General Relief $3,861,274; Aid to the Blind Supplemental $1,185,080; and Blind Pension $436,946.

A total of 97,504 applications were filed during the fiscal year, a decrease of 5,048 (4.9 per cent). AFDC received the most applications, 48,179, followed by Medical Assistance with 33,570. General Relief received 10,520 applications, Nursing Care, 4,188, Aid to the Blind, 831, and Blind Pension, 216.

Applications disposed of for all programs totaled 99,615 which was a decrease of 2,487 (-2.4 per cent) from the prior fiscal year. Of the total dispositions, 58,778 (59.0 per cent) were approvals and 40,837 (41.0 per cent) were rejections. Compared with the prior fiscal year, the approval rate showed an absolute increase of 1.5 per cent with a corresponding decrease in the rejection rate. Among the programs, AFDC dispositions totaled 48,835 of which 28,697 (58.8 per cent) were approvals and 20,138 (41.2 per cent) were rejections; Medical assistance dispo-

AVERAGE MONTHLY NUMBER OF RECIPIENTS OF PUBLIC ASSISTANCE, BY PROGRAM AND FISCAL YEAR, 1938-1978

Fiscal Year	OAA	AFDC		GR		PTD	AB	NC	ABS	SSI-SP	SP
		Families	Persons	Cases	Persons						
1938	73,378	1,778	4,743	47,189	157,577						
1939	73,606	7,718	18,805	35,718	106,941						
1940	80,955	10,225	24,172	26,715	75,310						
1941	106,378	12,707	29,965	24,515	68,404						
1942	115,724	14,221	32,717	16,009	43,781						
1943	112,165	13,295	30,881	10,832	25,930						
1944	105,757	11,330	27,583	6,857	14,632						
1945	101,745	10,827	27,373	7,963	19,488						
1946	102,093	12,605	33,074	8,550	21,238						
1947	109,752	17,398	45,574	10,946	27,885						
1948	115,491	20,287	52,642	11,680	27,924						
1949	120,354	22,200	56,961	14,152	33,941						
1950	128,422	25,215	63,443	16,659	39,032						
1951	132,295	25,102	62,185	13,610	32,862	5,630					
1952	131,997	22,707	56,625	9,629	25,080	10,323	2,411				
1953	130,902	20,901	52,513	8,770	23,772	12,312	2,886				
1954	132,504	20,374	52,156	5,631	12,586	13,971	3,190				
1955	133,135	21,498	55,577	5,751	10,825	14,262	3,539				
1956	131,194	20,745	54,668	5,999	9,673	13,390	4,107				
1957	127,666	20,290	54,933	6,654	9,875	13,889	4,668				
1958	124,576	22,855	68,339	6,674	9,641	14,786	4,785				
1959	121,184	25,309	85,854	7,570	10,114	15,257	4,864				
1960	117,435	26,202	90,371	8,308	10,653	15,460	4,845				
1961	114,207	26,162	91,155	8,643	11,176	15,415	4,715				
1962	111,120	26,667	94,412	8,990	11,481	15,217	4,606				
1963	107,201	26,369	95,005	9,146	11,547	14,855	4,492				
1964	104,347	25,925	94,983	9,260	11,623	14,604	4,344				
1965	102,122	26,137	97,598	9,711	12,129	14,986	4,178				
1966	99,493	26,053	98,495	9,568	11,804	15,527	3,986				
1967	96,644	26,043	99,046	9,306	11,412	16,081	3,797				
1968	93,699	26,937	102,464	9,582	11,731	16,886	3,640				
1969	90,926	29,390	109,036	10,108	12,085	17,646	3,587				
1970	92,457	35,532	126,890	10,978	12,986	18,240	3,680				
1971	94,516	47,992	164,318	11,504	12,817	20,114	3,728				
1972	94,116	60,644	197,265	12,732	14,086	21,986	3,829				
1973	91,402	67,667	212,077	13,103	14,406	23,083	3,901				
1974	89,196	75,166	232,847	12,516	13,519	24,713	3,856	4,065	93	49,480	22,176
1975		82,253	257,544	10,394	11,110			7,876	735	45,539	16,167
1976		87,532	270,937	8,784	9,446			8,065	995	39,469	13,336
1977		88,521	267,276	7,004	7,453			8,553	1,007	33,978	11,397
1978		72,425	213,693	4,734	4,989			8,429	868	29,192	9,840

sitions totaled 34,164 including 21,558 approvals (63.1 per cent) and 12,606 rejections (36.9 per cent); dispositions for General Relief numbered 11,027 including 5,052 approvals (45.8 per cent) and 5,975 rejections (54.2 per cent); Nursing Care dispositions totaled 4,551 with 3,084 approvals (67.8 per cent) and 1,467 rejections (32.2 per cent); ABS dispositions totaled 842 with 291 approvals (34.6 per cent) and 551 rejections (65.4 per cent); and Blind Pension dispositions totaled 196 with 96 approvals (49.0 per cent) and 100 rejections (51.0 per cent).

TOTAL EXPENDITURES FOR PUBLIC ASSISTANCE, BY PROGRAM, AND FISCAL YEAR 1938-1978

Fiscal Year	OAA	AFDC	GR	PTD	AB	NC	ABS	SSI-SP	SP
1938	12,407,623	342,126	5,430,577						
1939	16,151.567	2,380,524	4,810,694						
1940	17,037,284	2,707,655	3,856,881						
1941	21,221,407	4,132,952	3,791,235						
1942	18,104,257	3,950,547	2,764,492						
1943	23,890,278	4,927,905	2,176,355						
1944	26,878,738	4,394,982	1,841,408						
1945	27,868,325	4,325,823	2,238,578						
1946	32,030,620	5,377,414	2,271,776						
1947	43,773,933	7,247,857	3,689,517						
1948	48,367,344	9,770,235	3,839,362						
1949	59,336,897	13,848,585	5,344,683						
1950	66,627,001	16,023,757	6,403,771						
1951	69,118,200	15,714,967	5,171,714	2,378,006					
1952	69,282,883	14,222,932	3,526,972	5,741,225	1,078,821				
1953	77,034,015	14,658,219	3,571,655	7,456,502	1,761,390				
1954	79,608,808	15,922,557	2,384,007	8,707,148	2,105,070				
1955	79,420,974	17,360,112	2,705,460	8,885,736	2,335,630				
1956	78,220,706	17,051,415	3,118,375	8,361,923	2,918,880				
1957	81,849,555	19,318,849	3,998,203	9,306,784	3,361,260				
1958	81,495,992	23,794,310	4,142,584	10,019,843	3,445,260				
1959	81,053,332	26,156,515	5,874,885	10,543,468	3,599,115				
1960	83,068,603	28,507,672	6,151,620	11,311,297	3,779,360				
1961	81,963,485	27,912,058	6,350,232	11,481,705	3,677,635				
1962	79,258,672	29,794,349	7,318,387	11,304,733	3,592,810				
1963	79,567,118	29,917,907	6,721,724	11,480,742	3,637,010				
1964	80,196,615	29,835,215	7,445,476	11,739,412	3,835,736				
1965	78,773,629	30,556,796	7,807,689	12,168,215	3,759,825				
1966	79,734,067	31,449,727	7,724,156	13,091,000	3,758,043				
1967	81,197,534	32,394,367	7,652,289	14,053,457	3,645,440				
1968	79,159,737	33,305,844	7,716,287	15,026,646	3,682,830				
1969	78,815,269	38,651,363	7,876,469	15,463,287	3,714,851				
1970	84,478,099	48,601,131	9,129,746	16,945,965	3,963,653				
1971	86,204,380	64,544,254	9,541,025	18,591,620	4,071,334				
1972	85,624,951	78,748,819	10,119,529	20,091,304	4,524,659				
1973	89,424,484	84,705,621	11,091,726	23,597,794	4,838,788				
1974	44,617,046	101,659,101	10,469,550	12,871,627	2,519,846	2819,937	34,878	11060,121	9008,619
1975		118,930,671	8,365,649			17122,342	891,375	17883,478	10603,233
1976		136,241,804	7,159,310			17595,267	1231,753	14642,410	7621,464
1977		138,122,582	5,750,299			18927,290	1390,151	12185,667	6109,796
1978		140,276,364	3,861,274			18886,751	1185,080	10382,778	5319,213

In addition to cash assistance payments, a total of $204.3 million was expended for medical services under the Title XIX Medicaid program. This was an increase of $29.9 million (17.2 per cent) over fiscal year 1976-77.

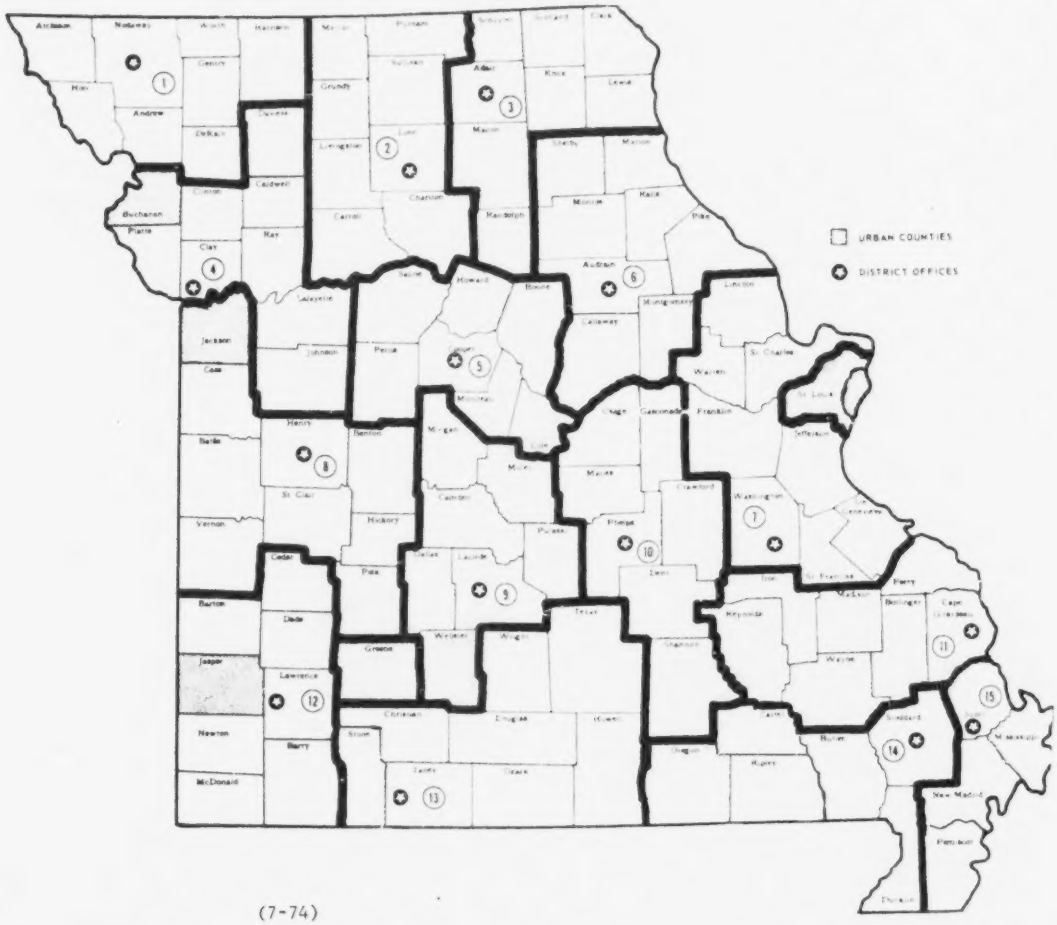
On October 1, 1975 Title XX of the Social Security Act was implemented in the State of Missouri, as it was throughout the United States. Title XX provides funding for the provision of social services to the income families, including both public welfare and non-public welfare indi-

AVERAGE MONTHLY PAYMENTS TO RECIPIENTS OF PUBLIC ASSISTANCE, BY PROGRAM AND FISCAL YEAR, 1938-1978

Fiscal Year	OAA	AFDC		GR		PTD	AB	BC	ABS	SSI-SP	SP
		Per Family	Per Person	Per Case	Per Person						
1938	14.09	32.07	12.62	9.59	2.87						
1939	18.28	25.70	10.55	11.22	3.75						
1940	17.53	22.07	9.33	12.03	4.27						
1941	16.62	27.10	11.49	12.89	4.62						
1942	13.04	23.15	10.06	14.39	5.26						
1943	17.75	30.89	13.30	18.74	6.99						
1944	21.18	32.33	13.28	22.38	10.49						
1945	22.83	33.30	13.17	23.43	9.57						
1946	26.14	35.55	13.55	22.14	8.91						
1947	33.24	34.72	13.25	28.09	11.03						
1948	34.90	40.13	15.47	27.38	11.46						
1949	41.08	51.98	20.26	31.47	13.12						
1950	43.23	52.96	21.05	32.03	13.67						
1951	43.54	52.17	21.06	31.67	13.11	46.93					
1952	43.74	52.20	20.93	30.52	11.72	46.35	50.00				
1953	49.04	58.44	23.26	33.94	12.52	50.60	50.00				
1954	50.07	65.13	25.44	35.28	15.78	51.94	55.00				
1955	49.71	67.29	26.03	39.20	20.83	51.92	55.00				
1956	49.69	68.50	25.99	43.32	26.86	52.04	60.00				
1957	53.43	79.34	29.31	50.07	33.74	55.84	60.00				
1958	54.52	86.76	29.02	51.73	35.81	56.47	60.00				
1959	55.74	86.12	25.39	64.67	48.41	57.59	60.00				
1960	58.95	90.67	26.29	61.70	48.12	60.97	65.00				
1961	59.81	88.91	25.52	61.23	47.35	62.07	65.00				
1962	59.44	93.11	26.30	67.84	53.12	61.91	65.00				
1963	61.85	94.55	26.24	61.24	48.51	64.40	70.00				
1964	64.05	95.90	26.18	67.00	53.38	66.99	75.00				
1965	64.28	97.43	26.09	67.00	53.64	67.66	75.00				
1966	66.78	100.60	26.61	67.27	54.53	70.26	80.00				
1967	70.01	103.66	27.26	68.53	55.88	72.83	80.00				
1968	70.40	103.04	27.09	67.11	54.81	74.16	84.31				
1969	72.23	109.59	29.54	64.94	54.31	73.88	86.30				
1970	76.14	113.98	31.92	69.30	58.59	77.42	89.76				
1971	76.01	112.07	32.73	69.11	62.03	77.03	91.01				
1972	75.82	108.21	33.27	66.23	59.87	76.15	98.47				
1973	81.53	104.32	33.28	70.54	64.16	85.19	103.37				
1974	83.37	112.71	36.38	69.71	64.54	86.81	108.91	173.43	93.76	37.25	67.71
1975		120.49	38.48	67.07	62.75			181.17	101.06	32.73	54.65
1976		126.71	41.90	67.92	63.16			181.81	103.16	30.92	47.62
1977		130.03	43.06	68.42	64.30			184.41	115.04	29.89	44.67
1978		161.40	54.70	67.97	64.50			186.72	113.77	29.64	45.05

viduals. Some of the services provided under Title XX are adoptions, alcohol and drug abuse counseling, chore, day care, educational services, employment services, family planning, foster care, home delivered and congregate meals, information and referral, legal assistance, and transportation. The specifics of this program are discussed in greater detail in Part V of this Annual Report, under the Social Services Section.

MISSOURI
DIVISION OF FAMILY SERVICES
ADMINISTRATIVE DISTRICTS



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ADMINISTRATIVE STAFF

A total of 5,535 persons were employed by the Division of Family Services at the end of June 1978. This was a decrease of 132 employees (2.3 per cent) from June 1977. The distribution of employees within the field offices was the following: 120 county directors, 332 Income Maintenance Supervisors, 1,590 Income Maintenance Caseworkers, 1,050 Social Service workers and caseworkers, 238 Social Service Supervisors, 1,204 clerical staff and support workers, 99 workers in the blind district offices, 95 child support enforcement personnel, and 249 other professional, clerical and labor and trade employees. These figures reflect both full time and part time personnel. State office personnel totaled 558.

The number of staff additions totaled 1,129, compared with 1,261 separations, resulting in an overall separation rate of 23 per 100 employees, or 1 per cent more than during the previous fiscal year.

Table 1. Number of Employees of the Division of Family Services, Replacements and Separations, July 1977-June 1978

Month	Number of Employees at Beginning of Month	Number of Replacements or Additions	Number of Separations	Number of Employees at End of Month
TOTAL	XXXX	1,129	1,261	XXXX
1978				
June	5,696	79	240	5,535
May	5,699	77	80	5,696
April	5,704	75	80	5,699
March	5,723	61	80	5,704
February	5,739	60	76	5,723
January	5,765	70	96	5,739
1977				
December	5,761	73	69	5,765
November	5,727	95	61	5,761
October	5,650	155	78	5,727
September	5,611	143	104	5,650
August	5,645	147	181	5,611
July	5,667	94	116	5,645

PART II

LEGISLATIVE DEVELOPMENTS

The 79th General Assembly (Second Regular Session) which convened on January 4, 1978 and adjourned on April 30, 1978, enacted the following legislation affecting the Division of Family Services:

SB 492 - This bill provided that effective July 1, 1979, the total state payment for practical nursing care for certain recipients would be increased up to $300 per month, domiciliary care up to $225 per month, and licensed boarding home care would be included at a rate up to $120 per month; provided for temporary leaves of absence from a hospital or nursing home not to exceed two days per any calendar quarter providing the temporary leave of absence is specifically provided for in the recipients plan of care, and provided payment to be made of $160 per month less any federal supplemental security income payments to persons who meet the eligibility standards for aid to the blind in effect on December 31, 1973. The bill was approved by the Governor on April 28, 1978.

SB 505 - This bill provided that effective July 1, 1979, payment for outpatient hospital services, including diagnostic services which are approved as being medically necessary by a hospital utilization review committee or by a professional standard review organization, shall be made in amounts which represent not more than 80 per cent of the lesser of reasonable costs or customary charges for such services. This bill was approved by the Governor on June 14, 1978.

SB 596 - This bill provided that effective July 1, 1979, for the purposes of determining eligibility for public assistance, the value of property less encumbrances of record, shall not exceed $20,500. The bill was approved by the Governor on June 13, 1978.

SB 671 - This bill provided that services of podiatrists shall be available to all eligible persons under the medical assistance benefits program, Section 208.152. The bill was approved by the Governor on June 15, and went into effect on August 13, 1978.

HB 881 - This bill provided for an increase in monthly blind pensions to $160. The bill was approved by the Governor on June 8 and went into effect on August 13, 1978.

CCS-HB 1009 - This bill appropriated funds to the Division of Family Services for the 1978-79 fiscal year as follows:

DIVISION OF FAMILY SERVICES
APPROPRIATIONS FOR THE 1978-79 FISCAL YEAR
SECOND REGULAR SESSION, 79th GENERAL ASSEMBLY

	Total	State	Federal
TOTAL	617,039,076*	240,639,755	366,051,631
Income Maintenance: (Total)	229,124,050	112,685,424	116,438,626
Assistance Programs--			
Aid to Families with Dependent Children	159,423,277	58,919,801	100,503,476
Blind Pensions	462,000	462,000	
Adult Supplementation	11,133,738	11,133,738	
Blind Supplementation	3,168,720	3,168,720	
General Relief	3,978,000	3,978,000	
Nursing Care	19,380,000	19,380,000	
Administration	31,578,315	15,643,165	15,935,150
Social Services: (Total)	88,482,103*	13,454,013	64,680,400
Vendor Programs--			
Homeless, Dependent and Neglected Children			
Foster Care, Subsidized Adoptions, Unmarried Mothers	5,817,714	4,543,195	1,274,519
Residential Treatment	5,515,098	1,378,775	4,136,323
Child Abuse and Neglect Multi-Disciplinary Treatment	1,310,640	327,660	982,980
Purchase of Day Care	7,464,530	1,451,087	6,013,443
Purchase of Homemaker and Chore Services	3,200,000	800,000	2,400,000
AFDC Work Training	400,000	400,000	
Purchase of Service Expenditures	33,882,026*		25,411,519
Title XX Vendor Training	2,133,333*		1,600,000
Title IV-B (Foster Care)	2,732,977		2,732,977
Administration	26,025,785*	4,553,296	20,128,639
Medical Services: (Total)	267,805,423	99,903,723	167,901,700
Vendor Payments--			
Mental Hospital and ICF-MR	22,418,804		22,418,804
Nursing Care, Including Retroactive	96,203,196	37,970,401	58,232,795
Dental Services	5,951,060	2,388,755	3,562,305
Drugs and Pharmacist Fees	21,280,000	8,699,264	12,580,736
Physician Services	20,620,203	8,714,098	11,906,105
Special Adult Services	7,550,392	3,141,718	4,408,674
Inpatient Hospital	71,087,006	31,399,130	39,687,876
Outpatient Hospital	4,927,725	2,022,338	2,905,387
Other Services (Buy-In, Children's Services, Costs for Additional AFDC Recipients, Family Planning, Ambulance, Laboratory & X-ray, Home Health Services, EPSDT and Optometric Services)	12,401,278	4,368,377	8,032,901
Adminstration	5,365,759	1,199,642	4,166,117
Services for the Blind: (Total)	3,351,062	955,938	2,395,124
Services for the Visually Impaired (Vendor Payments)	1,921,000	468,000	1,453,000
Administration	1,430,062	487,938	942,124
Title IV-D Child Support Enforcement: (Total)	15,797,582	8,609,745	7,187,837
Reimbursements-			
Reimbursement to Counties	5,000,000		5,000,000
Federal Reimbursement & Local Incentives	8,000,000	8,000,000	
Administration	2,797,582	609,745	2,187,837
Board of Nursing Home Administrators:	44,811	44,811	
Administrative Services:			
Administration	12,434,045	4,986,101	7,447,944

* Includes $1,877,183 Local Funds and $8,470,507 Donated.

HB 972 - This bill provided for certain changes in the conditions of and procedures for termination of parental rights. The bill was approved by the Governor on June 13 and went into effect on August 13, 1978.

HB 1684 - This bill provided that adoption subsidies are to be paid only for children who are eligible for foster payments under the homeless, dependent, and neglected children program. This bill was approved by the Governor on June 14 and went into effect on August 13, 1978.

These bills are now incorporated into the 1978 Revised Statutes of Missouri as follows:

SB 492 is now incorporated into Section 208.030 and the second version of Section 208.152, RSMo 1978;

SB 505 is now incorporated into the third version of Section 208.152, RSMo 1978;

SB 596 is now incorporated into Section 208.010, RSMo 1978; and

SB 671 is now incorporated into the first version of Section 208.152, RSMo 1978.

HB 881 is now incorporated into Section 209.040, RSMo 1978;

HB 972 is now incorporated into Sections 211.441, 211.451, 211.461, 211.471, 211.481, 211.491, 211.501, 211.511, RSMo 1978; and

HB 1684 is now incorporated into Section 453.073, RSMo 1978.

PART III

REVIEW OF PUBLIC ASSISTANCE PROGRAMS

AID TO FAMILIES WITH DEPENDENT CHILDREN - REGULAR

Aid to families with dependent children is a federal-state program of public assistance which provides assistance to children under 18 years of age who are deprived of support due to the absence of one or both parents from home by reason of death, continued absence or physical or mental incapacity. The primary purpose of this program is to provide assistance to children in their own homes who become dependent through no fault of their own. Its basic philosophy is focused on keeping families intact and thereby permitting children to obtain the benefits associated with normal family life. First payments in Missouri under this program were started in 1938.

Maximum benefits for AFDC families were revised in July 1977. Prior to July, maximum benefits were fixed by law at $56 for the first child, $44 for the eligible adult relative, and $35 for each additional child. In July 1977 the maximum payment was changed to a fixed percentage of need standard assigned a given assistance group size. For fiscal year 1977-78 the "percentage of need" was 65 per cent. In determining payment, the budgetable income of recipients is compared to the "percentage of

Table 2. Number of Recipients and Amount of Payments for Aid to Families with Dependent Children, July 1977-June 1978*

Month	Recipients			Amount of Payments		
	Families	Children	Persons	Total **	Average	
					Per Family	Per Person
TOTAL	XXXX	XXXX	XXXX	140,276,364	XXXX	XXXX
1978						
June	68,928	143,081	203,803	11,566,313	167.80	56.75
May	69,820	145,332	206,648	11,693,004	167.47	56.58
April	69,565	145,601	206,473	11,643,663	167.38	56.39
March	70,961	148,760	210,709	11,854,380	167.05	56.26
February	70,298	148,030	209,014	11,701,429	166.45	55.98
January	70,921	149,576	210,681	11,725,140	165.33	55.65
1977						
December	72,575	153,371	215,066	11,857,730	163.39	55.14
November	72,491	153,987	214,532	11,689,255	161.25	54.49
October	74,033	157,469	218,163	11,745,607	158.65	53.84
September	75,500	160,773	221,487	11,778,016	156.00	53.18
August	75,785	162,405	221,066	11,449,975	151.08	51.79
July	78,142	167,437	226,674	11,571,852	148.09	51.05

* For data prior to July 1977, see Appendix B, Tables V and VI and previous reports of the Division of Family Services.

** Does not include retroactive and deficiency payments and AFDC-FC data but does include AFDC-UF data.

need standard" rather than the full need standard. The practical effect of these changes is to close many AFDC cases that have income and to increase the payments to families with little or no income.

The "percentage of need" formula caused a sharp decline in the July AFDC caseload. There were 9,162 fewer families and 31,865 fewer persons receiving AFDC than in June. This was a 10.5 per cent decrease in families and 12.3 per cent decrease in persons.

Throughout fiscal year 1977-78 the AFDC caseload continued to decline reaching a low of 68,928 families and 203,803 persons in June 1978. Compared to June 1977, this was a decrease of 18,376 families (21.0 per cent) and 54,736 persons (21.2 per cent). This compares to a decrease of 1.25 per cent for families and 4.93 per cent for persons in the prior fiscal year.

Table 3. Applications for Aid to Families with Dependent Children Received, Disposed of, and Awaiting Disposition at End of Month, July 1977-June 1978*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month ≠
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	48,179	48,835	28,697	20,138	XXXX
1978					
June	4,182	4,052	2,504	1,548	2,280
May	3,757	3,915	2,115	1,800	2,171
April	3,757	3,622	2,116	1,506	2,131
March	4,378	4,403	2,497	1,906	2,151
February	3,953	3,808	2,340	1,468	2,398
January	4,377	3,997	2,497	1,500	2,207
1977					
December	3,524	3,703	2,289	1,414	1,860
November	3,823	4,008	2,434	1,574	2,149
October	4,120	4,295	2,583	1,712	2,334
September	4,248	4,358	2,460	1,898	2,509
August	4,337	4,016	2,377	1,639	2,646
July	3,723	4,658	2,485	2,173	2,335

(Data for all months except June 1978 are estimated.)

* For monthly data prior to July 1977, see Annual Report for Division of Family Services, 1976-1977, p. 16.

** Includes such reasons as change of residence, voluntary withdrawal and another form of assistance considered more appropriate.

≠ Figure does not always agree with number carried over as pending at first of following month because of adjustments in previous figures.

Caseload trends can be influenced by application activity, particularly by the number of applications received and disposed of. During fiscal year 1977-78, a total of 48,179 applications were received, which was a decrease of 1,390 or 2.8 per cent from the prior year. The average monthly number of applications during the year was 4,015 compared with 4,131 during the previous year. During the year 48,835 applications were disposed of, which was an increase of 844 or 1.8 per cent from the previous year. Of the total dispositions 28,697 or 58.8 per cent were found eligible and 20,138 or 41.2 per cent were found ineligible. Compared with the previous year the approval rate had declined by 3.8 per cent. At the close of the fiscal year 2,280 applications were pending; this was a decrease of 673 or 22.8 per cent from the prior year.

Total expenditures in 1977-78 were $140.3 million, which was an increase of $2.15 million (1.56 per cent) compared with 1976-77. Average monthly costs were $11.69 million compared with $11.51 million in the preceding year. The June 1978 average payment of $167.80 per family was an increase of $39.81 over June 1977. The June 1978 payment per person of $56.75 was an increase of $13.53 over June 1977. The size of the increase was due to the change to percentage of need and the incorporation of child support payments into the AFDC check.

Every two years, the Division of Family Services conducts a survey concerning the characteristics of Aid to Families with Dependent Children families. The most recent survey was in March 1977. Some of the principal findings of the survey are briefly reviewed below.

One-half (49.99 per cent) of AFDC families are white and one-half (49.50) are black. Contrary to popular opinion, most AFDC families consist of 1 to 3 children. The 1 to 3 child families account for 84.3 per cent of all AFDC families. Two out of three AFDC families (66.65 per cent) have 3 or 2 children.

Table 4. Aid to Families with Dependent Children Case Load Distributed by Size of Family, June 1978

Size of Family	Cases	
	Number	Per Cent
TOTAL	68,928	100.0
1 child	27,434	39.8
2 children	18,542	26.9
3 children	12,200	17.7
4 children	5,170	7.5
5 children	2,895	4.2
6 children	1,516	2.2
7 children	689	1.0
8 children or more	482	0.7

Of the 86,346 AFDC recipients in March 1977, there were 23.8 per cent that had received AFDC for one year or less.

The reason for dependency in most cases (91.1 per cent) is due to the absence of the father from the home for reasons other than death. Only 3.5 per cent are eligible because of the death of the father and 4.5 per cent because of the mental or physical incapacity of the father. Absence of the father for reasons other than death has increased rapidly since the beginning of the AFDC program in 1938. In 1938, this reason accounted for 52 per cent of the cases, and has increased each year since. Only 0.9 per cent of the reasons for dependency were related to being deprived of the mother's support.

The age distribution of AFDC children shows that 28.1 per cent are less than age 6 and that 78.4 per cent are less than age 14.

According to the 1977 Study, 29.68 per cent of AFDC mothers work full time and another 10.96 per cent work part time. Due to the changes in the AFDC program in July 1977, many cases with working mothers were closed. Thus the actual per cent of AFDC mothers that worked during fiscal year 1977-78 is considerably lower than the AFDC Study statistics.

AID TO FAMILIES WITH DEPENDENT CHILDREN-UNEMPLOYED FATHER PROGRAM

Missouri had operated an Aid to Families with Dependent Children-Unemployed Father program from July 1, 1968 to December 31, 1971. Since the Seventy-sixth General Assembly failed to enact legislation extending this program, it automatically terminated as of December 31, 1971. The Seventy-seventh General Assembly reinstated the Aid to Families with Dependent Children-Unemployed Father program in July 1973, but at that time only unemployed stepfathers or adoptive fathers in the home were included; unemployed natural fathers were not included in the program. For this reason the number of families involved were quite small compared to the former Aid to Families with Dependent Children-Unemployed Father program. In order to correct this, the Seventy-eighth General Assembly extended the program to include natural fathers and removed the stepfathers as eligible payees. This law became effective July 15, 1975 and explains the dramatic increase in the Aid to Families with Dependent Children-Unemployed Father program since that time.

Table 5. Number of Recipients and Amount of Payments for Aid to Families with Dependent Children-Unemployed Fathers, July 1977-June 1978

Month	Recipients			Amount of Payments		
	Families	Children	Persons	Total	Average	
					Per Family	Per Person
TOTAL	XXX	XXX	XXX	1,341,049	XXX	XXX
1977						
June	434	1,211	2,079	104,231	240.16	50.14
May	544	1,511	2,599	132,776	244.07	51.09
April	544	1,550	2,638	131,345	241.44	49.79
March	485	1,387	2,357	116,970	241.18	49.63
February	432	1,257	2,121	104,487	241.87	49.26
January	400	1,193	1,993	96,534	241.34	48.44
1976						
December	397	1,178	1,972	95,706	241.07	48.53
November	419	1,219	2,057	100,918	240.85	49.06
October	461	1,320	2,242	110,719	240.17	49.38
September	485	1,372	2,342	115,251	237.63	49.21
August	530	1,573	2,633	114,308	215.68	43.41
July	523	1,486	2,532	117,804	225.25	46.53

AID TO FAMILIES WITH DEPENDENT CHILDREN - FOSTER CARE PROGRAM

The Seventy-second General Assembly enacted legislation (Section 208.047, Laws of Mo. 1969) which provides for the continuation of Aid to Families with Dependent Children benefits to certain neglected and/or abused children who are removed from their parents or relatives custody by court order. This legislation became effective October 13, 1963.

Under provisions of this law the Juvenile Courts are authorized to place in the care and custody of the Division of Family Services Children who need foster care because of unsatisfactory home conditions which are detrimental to their welfare.

The Division of Family Services places those children in foster family homes or non-profit child-caring institutions. To be eligible for these benefits children must have received Aid to Families with Dependent Children benefits in and for the month in which the court proceedings leading to such a determination were started, or would have received Aid to Families with Dependent Children benefits for that month if application for such assistance had been made. Aid to Families with Dependent Children-Foster Care can also be provided to children who have been living with an eligible Aid to Families with Dependent Children parent or relative within six months prior to the month in which such proceedings were started if such eligible parent or relative had made application for Aid to Families with Dependent Children.

During the absence of the child or children from the home, every effort is made to improve conditions in the home so that the child or children can be returned to the home as soon as possible.

As indicated in Table 6, the number of children receiving Aid to Families with Dependent Children-Foster Care increased during the 1977-78 fiscal year. An average of 2,094 children received assistance each month compared to 1,877 children in the prior fiscal year. Total payments for the year were $2,458,061 or $204,838 per month. The average payment per child was $97.84. The payment per child varied during the year from $97.31 to $98.40.

Table 6. Number of Children and Amount of Payments for Aid to Families with Dependent Children-Foster Care, July 1977-June 1978

Month	Number of Children	Amount of Payments	Average Per Child
TOTAL	XXX	2,458,061	XXX
1978			
June	2,150	210,820	98.06
May	2,139	210,484	98.40
April	2,101	205,535	97.83
March	2,112	207,457	98.23
February	2,105	205,610	97.68
January	2,132	208,660	97.87
1977			
December	2,062	200,659	97.31
November	2,109	206,229	97.79
October	2,078	203,104	97.74
September	2,040	199,734	97.91
August	2,072	201,862	97.42
July	2,023	197,907	97.83

GENERAL RELIEF

General Relief is the public assistance program financed entirely from state funds which provides assistance to needy unemployed persons. Persons eligible for this type of assistance are, for the most part, physically or mentally incapacitated and unable to work. Single employable persons or families with any employable members are not eligible for this type of assistance. The maximum payment under this program is set at $70 per person per month.

The General Relief caseload showed a sizeable decrease compared with the prior fiscal year. In June 1978, a total of 4,691 persons received assistance which was a decrease of 2,120 persons (31.1 per cent) from the preceding year. The average monthly caseload was 4,984 persons compared with an average of 7,443 persons during the previous fiscal year, (Table 7).

Table 7. Number of Recipients and Amount of Assistance for General Relief, July 1977-June 1978*

Month	Recipients				Amount of Assistance		
	Number of Persons in Cases	Number of Cases			Total	Average	
		Total	Family	Single Person		Per Person in Case	Per Case
TOTAL	XXXX	XXXX	XXXX	XXXX	$3,861,274	XXXX	XXXX
1978							
June	4,691	4,465	243	4,222	303,113	$64.62	67.89
May	4,676	4,439	231	4,208	301,760	64.53	67.98
April	4,611	4,384	234	4,150	297,381	64.49	67.83
March	4,838	4,608	254	4,354	313,356	64.77	68.00
February	4,713	4,497	213	4,284	305,991	64.92	68.04
January	4,818	4,590	223	4,367	311,896	64.74	67.95
1977							
December	4,992	4,745	240	4,505	322,384	64.58	67.94
November	4,851	4,619	225	4,394	313,483	64.62	67.87
October	5,220	4,945	250	4,695	337,848	64.72	68.32
September	5,333	5,029	267	4,762	343,613	64.43	68.33
August	5,318	5,005	272	4,733	340,624	64.05	68.06
July	5,751	5,425	290	5,135	369,825	64.31	68.17

* For data prior to July 1977, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

Total payments were $3,861,274, a decrease of $1,889,025 (32.9 per cent) from the previous fiscal year. Meanwhile, average payments per person of $64.62 in June 1978 was an increase of 0.04 per person over June 1977.

Applications received showed a decrease over the prior year while applications disposed of also showed a decrease (Table 8). A total of 10,520 applications were received which was a decrease of 5,166 (32.9 per cent) over the previous year. Applications disposed of totaled 11,027 including 5,052 approvals and 5,975 rejections. Approvals were down by 2,576 (33.8 per cent) and rejections showed a decrease of 2,279 (27.6 per cent).

Table 8. Applications for General Relief Received, Disposed of, and Awaiting Disposition at End of Month, July 1977-June 1978*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month**
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons	
TOTAL	10,520	11,027	5,052	5,975	XXX
1978					
June	991	959	429	530	607
May	918	930	390	540	579
April	764	897	380	517	568
March	921	1,057	486	571	579
February	865	830	390	440	595
January	830	820	360	460	560
1977					
December	786	801	351	450	540
November	827	851	392	459	564
October	862	918	430	488	588
September	984	1,054	515	539	644
August	939	971	489	482	710
July	833	939	440	499	748

*Data for all months except June 1978 are estimated.
**Figure does not always agree with number carried over as pending at first of following month because of adjustments in previous figures.

BLIND PENSION

The Blind Pension program was established in 1921 to provide monthly pensions to blind residents of Missouri. This program is financed entirely from state funds derived from a special property tax. The blind pension program provides for the needs of blind persons who are unable to qualify for benefits under the state aid to the blind program. Blind Pension payments are set by law at $135 per month. Recipients may receive a maximum of $150 if residing in a domiciliary nursing home and may receive $200 if residing in a practical nursing home.

Table 9. Number of Recipients and Amount of Payments for Blind Pension, July 1977-June 1978

Month	Number of Recipients	Amount of Payments
TOTAL	XXX	436,946
1978		
June	270	36,920
May	270	36,985
April	262	35,840
March	270	36,938
February	268	36,733
January	268	36,798
1977		
December	266	36,528
November	261	35,918
October	264	36,388
September	262	36,118
August	260	35,890
July	260	35,890

* For data prior to July 1977, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

In June 1978, a total of 270 received blind pension payments. This was an increase of 21 (8.4 per cent) recipients over June 1977. Total payments in 1977-78 were $436,946, an increase of $55,349 (14.5 per cent) from the preceding fiscal year.

Table 10. Report on Number of Blind Pension Recipients, Additions and Closings, July 1977-June 1978

Case Load	Recipients
On roll beginning of year	246
Added during year	96
Total during year	342
Closed during year	72
On roll at end of year	270

SUPPLEMENTAL NURSING CARE

Initiated January 1, 1974, supplemental nursing care payments are made to certain eligible adults residing in licensed professional, practical or domiciliary nursing homes. The person must meet the December 1973 eligibility requirements for old age assistance, permanently and totally disabled or aid to the blind. Persons may not receive nursing care benefits if they are eligible for state supplemental payments, aid to families with dependent children, general relief, blind pension, or aid to the blind supplemental payments or if they are eligible for vendor payments in their behalf for professional nursing home or intermediate care facility.

The maximum payment for persons eligible for nursing care in licensed practical nursing homes is $200 per month and $150 per month in domiciliary nursing homes.

Table 11. Number of Recipients and Amount of Payments for Supplemental Nursing Care, July 1977-June 1978*

Month	Number of Recipients	Amount of Payments	
		Total	Average Per Recipient
TOTAL	XXXX	18,886,751	XXXX
1978			
June	8,344	1,567,658	187.88
May	8,362	1,573,218	188.14
April	8,306	1,562,080	188.07
March	8,456	1,588,686	187.88
February	8,366	1,568,822	187.52
January	8,395	1,570,766	187.11
1977			
December	8,446	1,577,701	186.80
November	8,293	1,545,042	186.31
October	8,352	1,553,819	186.04
September	8,412	1,563,449	185.86
August	8,377	1,550,103	185.04
July	8,977	1,665,407	185.52

* For data prior to July 1977, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

In June 1978, there were 8,344 recipients of supplemental nursing care, 49 (0.6 per cent) less than in June 1977. The monthly average of recipients was 8,424, ranging from a low of 8,293 recipients in November to a high of 8,977 recipients in July. Total payments for the year were $18,886,751; the average payment per recipient being $186.84.

Applications received totaled 4,188. Of the 4,551 applications disposed of, 3,084 were approved for assistance and 1,467 were rejected. At the end of June, 291 applications were awaiting disposition.

Table 12. Applications for Supplemental Nursing Care Received, Disposed of, and Awaiting Disposition at End of Month, July 1977-June 1978*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month≠
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	4,188	4,551	3,084	1,467	XXX
1978					
June	386	414	276	138	291
May	361	393	252	141	321
April	250	381	246	135	276
March	509	515	345	170	294
February	399	409	277	132	300
January	259	380	280	100	312
1977					
December	343	305	264	41	293
November	365	355	255	100	309
October	233	236	115	121	299
September	392	395	240	155	302
August	382	412	290	122	290
July	309	356	244	112	323

(Data for all months except June 1978 are estimated.)

* For monthly data prior to July 1977, see Annual Report for Division of Family Services, 1976-1977, p. 31.

** Includes such reasons as death, change of residence, and voluntary withdrawal.

≠ Figure usually does not agree with number carried over as pending at first of following month due to adjustment in previous figures.

SUPPLEMENTAL AID TO THE BLIND

Supplemental Aid to the Blind is a program initiated January 1, 1974 providing financial aid to needy blind persons over 18 who are unable to support themselves, who live in Missouri, who have less than $2,000 in personal property including cash, negotiable securities, and real property other than the home in which they live (or $4,000 if married and living with spouse) and who meet other requirements as set forth in law. Payments to eligible persons may not exceed $135 per month except that, if the claimant is in a domiciliary nursing home, the maximum payment is $150 and if claimant is in a practical nursing home the maximum payment is $200. This program is financed entirely by state funds.

Table 13. Number of Recipients and Amount of Payments for Supplemental Aid to the Blind, July 1977-June 1978*

Month	Number of Recipients	Amount of Payments	
		Total	Average Per Recipient
TOTAL	XXX	1,185,080	XXXX
1978			
June	804	91,267	113.52
May	805	90,986	113.03
April	796	89,617	112.58
March	805	90,583	112.53
February	807	90,869	112.60
January	810	91,203	112.60
1977			
December	828	94,055	113.59
November	947	107,775	113.81
October	953	109,255	114.64
September	954	109,539	114.82
August	936	108,391	115.80
July	955	111,540	116.80

* For data prior to July 1977, see Appendix B, Tables V and VI previous reports of the Division of Family Services.

During the fiscal year payments of $1,185,080 were made, the average payment per person being $113.95. There were 804 Supplemental Aid to the Blind recipients in June 1978, a decrease of 136 (14.5 per cent) over June 1977.

Table 14. Applications for Supplemental Aid to the Blind Received, Disposed of, and Awaiting Disposition at End of Month, July 1977-June 1978*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month/
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	831	842	291	551	XXX
1978					
June	76	75	25	50	73
May	74	73	24	49	72
April	71	70	23	47	68
March	91	73	23	50	87
February	62	57	17	40	68
January	72	75	25	50	63
1977					
December	47	64	19	45	64
November	62	73	31	42	76
October	67	60	15	45	87
September	73	82	36	46	80
August	77	75	22	53	89
July	59	65	31	34	87

(Data for all months except June 1978 are estimated.)

* For monthly data prior to July 1977, see Annual Report for Division of Family Services, 1976-1977, p. 35.

** Includes such reasons as death, change of residence and voluntary withdrawal.

/ Figure does not always agree with number carried over as pending at first of following month due to adjustment in previous figures.

During the year, 831 applications were received. Of the 842 disposed of, 291 were approved for assistance and 551 were rejected. At the end of June, 73 applications were awaiting disposition.

STATE SUPPLEMENTATION FOR ADULT RECIPIENTS

The Federal Supplementary Security Income (SSI) program established by the Social Security Amendments of 1972 became effective January 1, 1974. The Supplementary Security Income program, administered by the Social Security Administration, was created to replace the Federal-State public assistance program for the aged, blind and disabled. Subsequent amendments (P. L. 93-66 and P. L. 92-233) authorized the state to supplement the basic Federal Supplementary Security Income payment and required such supplementation in certain situations.

Under Federal law state supplementation is required in order to assure adult recipients on the public assistance rolls in December 1973. that they would not suffer any loss of income from their December 1973 income levels.

At the time of conversion to the SSI program, approximately 118,000 aged, blind, and disabled persons received assistance in December 1973. This group represented a "frozen group" of persons who were assured of continued benefits either fully or partially supplemented from state funds. Of the total, about 41,000 were found to be eligible for SSI without any state supplementation; 54,000 were found eligible for both SSI and state supplementation and the remaining 23,000 were found to be ineligible for SSI and therefore were supplemented entirely from state funds. Since no new cases can be added to this group of supplemental cases, the number of these cases will decline steadily as cases are closed by death or other reasons.

Table 15. Number of Recipients and Amount of Payments for Adult Programs Converted to SSI-SP, July 1977-June 1978*

Month	Number of SSI-SP Recipients	Adult Program Recipients				Amount of Payments	
		OAA	PTD	AB	GR	Total	Average Per Recipient
TOTAL	XXXX	XXXX	XXXX	XXXX	XXXX	10,382,778	XXXX
1978							
June	27,535	23,184	3,370	881	100	815,543	29.62
May	27,703	23,327	3,384	889	103	822,442	29.69
April	27,934	23,551	3,392	886	105	828,815	29.67
March	28,319	23,885	3,427	900	107	839,751	29.65
February	28,617	24,168	3,443	898	108	848,621	29.65
January	28,986	24,485	3,477	910	114	858,980	29.63
1977							
December	29,312	24,770	3,506	916	120	868,725	29.64
November	29,640	25,103	3,524	892	121	877,084	29.59
October	30,050	25,474	3,548	907	121	889,687	29.61
September	30,368	25,751	3,575	918	124	900,488	29.65
August	30,707	26,053	3,607	924	123	910,860	29.66
July	31,042	26,343	3,644	940	115	921,782	29.69

* For data prior to July 1977, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

As indicated above the supplemental cases consist of two groups - those that receive both SSI and state supplementation and those that receive state supplementation only. As indicated in Table 15, the SSI-SP group showed a total of 27,535 in June 1978, a decrease of 3,913 (12.4 per cent) from June 1977. Of the 27,535, there were 23,184 former old age assistance recipients, 3,370 (12.2 per cent) former recipients of the aid to disabled program; 881 (3.2 per cent) former aid to the blind recipients; and 100 (0.4 per cent) former general relief recipients. Total supplemental payments to these cases totaled $10,382,778. The average supplemental payment in June 1978 was $29.62 which was a decrease of $0.01 from June 1977.

The second group of supplemental cases are those which are found to be ineligible for SSI and therefore supplemented entirely from state funds. As indicated in Table 16, this group totaled 9,167 in June 1978, of which 6,986 (76.2 per cent) were former old age assistance recipients; 1,604 (17.5 per cent) had been aid to disabled recipients and 577 (6.3 per cent) were former recipients of aid to the blind. The June 1978 total of 9,167 recipients, which is a decrease of 1,560 or 14.5 per cent from June 1977, was brought about by a steady monthly decrease. Total supplemental payments for this fiscal year were $5,319,213 averaging $45.12 per person per month.

Table 16. Number of Recipients and Amount of Payments for Adult Program Converted to SP, July 1977-June 1978*

Month	Number of Recipients	Adult Program Recipients			Amount of Payments	
		OAA	PTD	AB	Total	Average Per Recipient
TOTAL	XXXX	XXXX	XXXX	XXXX	5,319,213	XXXX
1978						
June	9,167	6,986	1,604	577	417,430	45.54
May	9,260	7,067	1,617	576	422,146	45.59
April	9,367	7,143	1,641	583	426,397	45.52
March	9,485	7,238	1,662	585	431,325	45.47
February	9,605	7,341	1,683	581	436,854	45.48
January	9,767	7,489	1,698	580	443,789	45.44
1977						
December	9,908	7,606	1,731	571	450,003	45.42
November	9,960	7,706	1,759	495	446,047	44.78
October	10,129	7,844	1,798	487	452,239	44.65
September	10,254	7,944	1,827	483	457,320	44.60
August	10,391	8,056	1,857	478	462,753	44.53
July	10,604	8,233	1,889	482	472,910	44.60

* For data prior to July 1977, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

FAIR HEARINGS AND APPEALS

Under provision of the Social Security Law an applicant or recipient of public assistance has the right to appeal any decision of a county family services office with whom he is aggrieved. He may appeal denial of his application, discontinuance of payment, or the amount of benefit for which is determined to be eligible within 90 days from the date of such determination by the family services county office, and he may appeal on the basis of unreasonable delay in action at any time. The appeal is from the decision of the county office to the Director of the Division of Family Services. After the appeal is filed, a hearing is scheduled and held in the county of the appellant's residence, and a record of all testimony is made and preserved. It is on this basis that the Director of Family Services renders a decision, either reversing or upholding the action of the county family services office. In March 1975, a new appeal hearing procedure was introduced, with all predetermination appeals to be state level hearings.

During the 1977-78 fiscal year, a total of 2,856 appeals were filed which was a decrease of 654 or 18.6 per cent over the prior fiscal year (Table 17). In addition to the appeals filed during the fiscal year, a total of 987 carried forward from the preceding year making a total of 3,843 pending dispositions during the year. A total of 3,690 appeals were disposed of during the year which was an increase of 517 (16.3 per cent). Hearings were held in 2,022 appeals. Of those, the county office decision was affirmed or sustained in 1,504 cases or 74.4 per cent and reversed 518 times or 25.6 per cent. Of the 1,668 appeals disposed of without a hearing, 632 were withdrawn, 1,031 were dismissed, and in 5 cases the appellant died prior to the hearing. At the close of the fiscal year a total of 153 appeals were awaiting disposition.

Table 17. Appeals and Fair Hearings, July 1, 1977-June 30, 1978

Item	Number
Total beginning of year	987
Number added during year	2,856
Total open during year	3,843
Total disposed of during year	3,690
Hearings held during year	2,022
Affirmed (Sustained)	1,504
Reversed	518
Withdrawn	632
Death	5
Dismissed	1,031
Total pending end of year	153

FOOD STAMP PROGRAM

The food stamp program is a cooperative Federal-State program operated under the Food Stamp Act of 1964. All recipient benefits are paid out of Federal funds. Costs of administration are shared by Federal and State governments. This program is under the direction of the Food and Nutrition Services of the United States Department of Agriculture.

The food stamp program enables low-income families to increase their food purchasing power by investing their own food money in Federal food coupons (food stamps), which are worth more than the amount paid. The coupons are then spent like cash for food at retail stores. Any "food for human consumption" except tobacco and alcoholic beverages may be purchased with the stamps. They may not be used to purchase non-food items.

Eligibility is determined on a household basis. To be eligible, such households must have cooking facilities available, have limited income, and have limited available resources. All able-bodied persons age 18 to 64 (including strikers) are required to register with the Missouri State Employment Service. Members of the household who must care for children under 18 or incapacitated adults are exempt from work registration. Students who are enrolled at least half time, employed members of a household, and teachers, professional and administrative school personnel are also exempt from work registration. Households composed entirely of public assistance recipients are automatically eligible for food stamps.

The food stamp program differs from other income programs in that it is a hunger program based mainly on an adjusted monthly income rather than a poverty program based on property maximum and need determination. Households are not required to adjust their standard of living in order to participate.

The food stamp program began operation in the City of St. Louis in January 1963. In April 1970, a gradual expansion of the program began. By the end of 1973, 27 counties were participating, and as of June 30, 1974 all counties were participating.

During the 1977-78 fiscal year, $102,055,902 in Food Stamps were distributed. Of this total, $38,107,280 represents the amount of food stamps purchased and $63,948,622 represents the amount of bonus stamps received. On the average, bonus stamps amounted to 62.7 per cent of the total dollar value of stamps distributed. As shown in Table 18, the number of households participating decreased from 64,569 in July to 63,679 in June 1978, a decrease of 1.4 per cent. As of June 1978, there were 28,259 public assistance households and 35,420 non-public assistance households.

Table 18. Food Stamp Program, 1977-1978

Month	Number of Households Purchased	Number of Persons	Cash Paid	Bonus Received	Total Dollar Value
TOTAL	XXXX	XXXX	38,107,280	63,948,622	102,055,902
1978					
June	63,679	192,604	3,146,235	5,190,661	8,336,896
May	63,345	191,987	3,090,162	5,211,596	8,301,758
April	66,469	203,892	3,027,352	5,779,463	8,806,815
March	68,160	211,125	3,126,112	6,015,825	9,141,937
February	65,471	202,897	3,052,694	5,690,938	8,743,632
January	64,239	198,739	3,151,581	5,394,243	8,545,824
1977					
December	64,760	199,350	3,290,839	5,102,601	8,393,440
November	64,095	196,427	3,288,722	4,975,590	8,264,312
October	63,547	195,044	3,271,829	4,931,184	8,203,013
September	64,500	198,954	3,320,678	5,069,237	8,389,915
August	65,561	203,083	3,338,160	5,208,853	8,547,013
July	64,569	199,934	3,002,916	5,378,431	8,381,347

PART IV

MEDICAL SERVICES

Missouri's medical assistance program became effective on October 13, 1967, as a result of legislation (SB 53) enacted by the Seventy-fourth General Assembly. This program, popularly called "Medicaid", was established under the provisions of Title XIX of the 1965 Amendments to the Federal Social Security Act. The Missouri program provides the following medical services to recipients of public assistance.

(1) Physicians' Services
(2) Prescription Drugs
(3) Inpatient Hospital Care
(4) Outpatient Hospital Care
(5) X-ray and Laboratory Services
(6) Skilled Nursing Home Care for recipients age 21 and over
(7) Intermediate Care Facilities for the mentally retarded age 18 and over
(8) Intermediate Care Facilities for recipients age 18 and over
(9) Dental Services
(10) Home Health Services for recipients age 21 and over
(11) Early Periodic Screening, Diagnosis, and Treatment for recipients under age 21
(12) Emergency Ambulance Service
(13) Optometric Services
(14) Medical and Psychiatric services in state tuberculosis and mental hospitals for persons 65 years of age and older.

Effective January 1, 1978, orthopedic devices and other prosthetics including eye glasses, dentures, hearing aids, and wheel chairs were made available to all eligible persons.

In addition to the above services, which are available to all public assistance recipients, the Missouri Division of Family Services pays the Supplementary Medical Insurance Premium under the Medicare Program (Title XVIIIB) for all cash and supplementary security income payment recipients (except blind pension and general relief) 65 years of age and over and under 65 who have received Social Security Disability Insurance for more than two years. This premium was $7.70 per person per month during the current fiscal year.

Under the Medicare program, deductible and coinsurance costs must be paid either by the individual or someone in his behalf. These deductibles and coinsurance charges on Medicaid covered services are paid by the Missouri Division of Family Services for all public assistance recipients who also have Medicare coverage. Missouri's medical services program can be described as state administered and state operated. The Missouri Division of Family Services is directly responsible for the

processing and payment of medical claims. However, if a service is covered by Supplementary Medical Insurance, under the Social Security Administration, the bill is first processed by a Social Security Administration intermediary and is then forwarded to the Division of Family Services for payment of the deductible and coinsurance costs. The Missouri medical program is a vendor program with payments made only to the provider of the service. Each recipient receives a monthly identification card which he presents to the provider of medical services. The provider then bills the Division of Family Services directly for payment for the care of a Medicaid only person.

In the Missouri Medical Assistance program, the Division of Family Services requires a provider of services to sign an agreement of participation before services are rendered to public assistance recipients, if a provider is to be paid for those services. The agreement requires the provider to accept the Division of Family Services payment as full and final. Providers are not permitted to collect a partial fee from the recipient or his family as well as from the Division of Family Services.

Table 19. Medical Expenditures by Service and by Program, July 1977-June 1978

Services	Total All Programs	Program						
		Aged	Aid to Dependent Children	Disabled	General Relief	Blind	Blind Pension	Child Welfare Services Foster Care
TOTAL	204,274,164*	73,279,053	62,875,850	57,633,315	6,985,928	2,471,529	152,891	875,598
Physicians' Services	21,152,249	3,960,632	12,385,337	3,482,925	900,388	206,475	14,166	202,326
Drugs	20,418,549	9,503,837	4,730,967	5,238,143	501,771	375,176	32,180	36,475
Dental Services	5,545,122	164,653	4,891,345	299,362	80,022	17,559	1,936	90,245
Inpatient Hospital	63,185,026	4,872,748	36,085,024	16,000,263	5,231,169	507,879	19,224	468,719
Outpatient Hospital	6,294,711	834,567	4,066,070	1,076,099	208,352	48,837	2,670	58,116
Intermediate Care Facility	53,772,573	42,201,016		10,440,649	10,264	1,042,806	77,838	
Skilled Nursing Care	1,896,300	1,440,431		412,235	11,745	28,905	2,964	
X-ray and Laboratory	184,329	47,035	94,556	37,135	2,894	1,998	106	605
Ambulance Service	289,967	120,767	74,082	75,100	12,713	5,190	872	1,243
Home Health Services	301,441	36,392	22,653	210,851	18,359	12,295	891	
Optometric Services	599,191	36,335	508,841	27,108	8,251	763	24	17,869
TB Hospital	38,238	28,925	667	7,975		671		
Mental Hospital	4,226,946	3,836,142		356,748		34,056		
Buy In	6,426,421	5,119,157	16,308	1,102,037		188,919		
Intermediate Care Facility-Mentally Retarded	19,943,101	1,076,416		18,866,685				

* Payments for Mental Hospital and ICF-MR include payments made by Mental Health as well as Family Services.

A total of $204,274,164 was expended during the 1977-78 fiscal year for medical services (Table 19). This was an increase of about $29.9 million (17.2 per cent) from the prior fiscal year. This $204.3 million figure represents dollar expenditures during the 12 month period July 1, 1977 to June 30, 1978. This will differ from the appropriated amount which is based on services rendered during the 12 month period but which may actually be paid after the end of the fiscal year and are not reflected in this figure.

Of the $204.3 million expended for medical services during the fiscal year $62.9 million or 30.8 per cent was spent for recipients of aid to dependent children, $73.3 million or 35.9 per cent was for aged recipients, $57.6 million or 28.3 per cent was for persons receiving disabled benefits, $7.0 million or 3.4 per cent for general relief recipients, and $2.6 million or 1.3 per cent for persons receiving aid to the blind or blind pension benefits.

A total of 401,882 different individuals received one or more medical services at least one time during the year. The monthly expenditures and number of recipients of one or more services during the year are given below:

Month	Expenditures	Individuals *
1978		
June	15,255,320	148,786
May	15,952,719	153,325
April	16,729,743	157,504
March	14,179,683	155,181
February	13,982,476	154,757
January	14,027,669	161,044
1977		
December	13,572,470	163,903
November	14,644,024	167,866
October	13,586,645	163,795
September	14,249,447	158,260
August	15,567,958	179,576
July	11,891,304	167,039

* Expenditure and individual totals do not include payments or persons in Mental and TB hospitals, ICF-MF and Buy In.

The overall average cost per user was $458.67 per year and $38.22 per month, which were increases of $94.48 per year per user and $7.87 per month per user compared with the prior fiscal year. The range in costs by program per month was from a low of $15.63 per person for child welfare services to a high of $81.56 per person for aid to the disabled.

Type of Assistance	Average Cost Per User Per Year	Average Cost Per User Per Month
Overall average	458.67	38.22
Aged	971.85	80.99
Aid to Dependent Children	234.62	19.55
Disabled	978.76	81.56
Blind	808.48	67.37
General Relief	584.16	48.68
Blind Pension	501.28	41.77
Child Welfare Services-Foster Care	187.57	15.63

* The overall average and average cost for the aged and disabled are exclusive of payments for the Mentally Retarded in Intermediate Care Facilities.

PHYSICIANS' SERVICES

As of June 1978, a total of 11,920 physicians' in Missouri and adjoining states were signed up to participate in the medical assistance program. Of the 11,920 physicians there were 10,498 M. D.'s and 1,422 D. O.'s.

During the fiscal year a total of 295,669 different individuals received physicians' services at a total cost of $21,152,249. This was an increase of $732,688 (3.6 per cent) in payments compared with the previous fiscal year. Payments for physicians' services represented 10.4 per cent of total medical costs incurred during the fiscal year. The average monthly number of persons served was 72,463 and the average cost per person per month was $24.33. Compared with the preceding fiscal year, the average monthly number of persons decreased by 2,913 (3.9 per cent) and the average cost per person per month increased by $1.75. Of the 295,669 users of physicians' services, the largest group was aid to dependent children recipients totaling 195,764 or almost two-thirds (66.2 per cent) of all persons receiving physicians' services. The next largest group was the aged numbering 57,439 or 19.4 per cent of the total. These data are given by program in Table 20.

Table 20. Number of Recipients Receiving Physicians' Services by Assistance Program, July 1977-June 1978

Program	Number of Different Persons Served During the Year	Average Number of Persons Served Per Month	Total Cost	Average Cost Per Person Per Month
TOTAL	295,669	72,463	$21,152,249	$24.33
Aged	57,439	19,262	3,960,632	17.13
Aid to Dependent Children	195,764	40,907	12,385,337	25.23
Disabled	28,427	9,287	3,482,925	31.25
General Relief	8,239	1,620	900,388	46.32
Blind	2,352	750	206,475	22.94
Blind Pension	207	58	14,166	20.35
Child Welfare Services-Foster Care	3,241	579	202,326	29.12

Payments for physicians' services were made directly to the physician by the Division of Family Services for services rendered to recipients who do not also have Medicare coverage. Physicians' services for persons under both Medicare and Medicaid were paid by a combination of Supplementary Medical Insurance (Title XVIIIB of the Social Security Act) and direct payment to the physician of the deductible and coinsurance by the Division of Family Services. During the fiscal year, a total of $4,912,817 was paid in deductible and coinsurance for persons under both Medicare and Medicaid coverage. This was a decrease of $204,925 (4.0 per cent) from the preceding fiscal year.

For persons without XVIIIB coverage, the major subitems of expenditures in physicians' services were as follows:

	Average User Per Month	Total Annual Cost	Per Cent of Total Cost	Average Cost Per User Per Month
Total cost		17,514,604	100.0	
Office visits	34,039	4,621,349	26.4	11.31
Hospital visits	4,164	1,549,353	8.8	31.01
Surgery	1,168	1,667,195	9.5	118.95
Radiology	4,362	983,408	5.6	18.79
Obstetrics & Gynecology	1,162	2,373,633	13.6	170.23
Injections	351	29,649	0.2	7.04
All other		6,290,017	35.9	

INPATIENT HOSPITAL SERVICES

As of June 1978, a total of 1,170 hospitals in Missouri and outside the state were participating in the hospital care program. This was an increase of 11 hospitals over last year, mostly out of state.

Under this program medically necessary inpatient hospital care is purchased for up to 21 days per admission. For persons covered by Medicare Hospital Insurance, the Division of Family Services pays directly to the hospital the deductible and coinsurance charges up to the limitations in effect. During the 1977-78 fiscal year, these changes were made effective January 1, 1978: the inpatient hospital deductible was raised from $124 per benefit period to $140; the inpatient hospital coinsurance of $31 per day was raised to $36 per day, and the coinsurance lifetime reserve of $62 per day was raised to $72 per day. If hospitalization is medically necessary after these insurance benefits are exhausted, the Title XIX medical program will make the hospital payment for, not to exceed, 21 days of care per admission. For all recipients, not eligible for Medicare benefits, the Division of Family Services makes reasonable cost payments directly to the hospitals.

During the 1977-78 fiscal year, a total of 80,171 persons were admitted a total of 103,244 times representing 756,735 days of hospital care. The average days per admission for the Medicare-Medicaid recipients were 11.4, and for the Medicaid only individuals it was 6.0 days. By program the average days per admission were 11.4 for the aged, 4.7 for aid to dependent children, 9.0 for the disabled, 7.3 for general relief, 9.5 for aid to the blind and blind pension, and 5.2 for child welfare services. The readmission rate was 1.29, composed of 1.22 for the aged, 1.22 for aid to dependent children, 1.69 for the disabled, 1.34 for general relief, 1.42 for aid to the blind, 1.34 for blind pension, and 1.17 for child welfare services. Total hospital payments amounted to $63,185,026 and the average payment per admission was $612.00.

Table 21. Number of Recipients Receiving Inpatient Hospital Services by Assistance Program, July 1977-June 1978

Program	Unduplicated Persons	Number of Admissions	Readmission Rate	Total Days Paid	Average Days Per Admission	Total Payments	Average Payment Per Admission
TOTAL	80,171	103,244	1.29	756,735	7.3	63,185,026	612.00
Aged	20,852	25,370	1.22	289,339	11.4	4,872,748	192.07
Aid to Dependent Children	43,263	52,611	1.22	249,735	4.7	36,085,024	685.88
Disabled	10,773	18,206	1.69	164,444	9.0	16,000,263	878.85
General Relief	3,719	4,978	1.34	36,251	7.3	5,231,169	1,050.86
Blind	947	1,345	1.42	12,786	9.5	507,879	377.61
Blind Pension	64	86	1.34	818	9.5	19,224	223.53
Child Welfare Services-Foster Care	553	648	1.17	3,362	5.2	468,719	723.33

The number of unduplicated persons showed a decrease of 3,826 (4.6 per cent); the number of admissions decreased by 2,836 (2.7 per cent); total payments increased by $9,234,982 (17.1 per cent); total days paid showed an increase of 7,187 (1.0 per cent); and the average hospital stay increased 0.2 days from 7.1 days to 7.3 days.

Also, the average payment per admission of $612.00 in 1977-78 was an increase of $103.42 from the prior fiscal year, or about 20.3 per cent. However, it should be pointed out that this average payment includes hospital care for persons also under Medicare coverage for whom the Division of Family Services pays only the coinsurance and deductible costs and blood charges. When adjustment is made for this group of aged persons and the two programs for the blind, the average cost per admission was $755.93. The average cost per admission for persons under Medicare coverage and the blind recipients was $201.48.

PRESCRIPTION DRUGS

As of June 1978, a total of 1,352 pharmacies, were participating in the drug program.

During the 1977-78 fiscal year a total of 3,714,555 prescriptions were filled at a cost of $20,418,549 or an average prescription cost of $5.50. A total of 273,377 unduplicated persons received one or more prescriptions during the year with a monthly average of persons receiving prescriptions of 101,591. Compared with the prior fiscal year, the number of persons served showed a decrease while there was an increase in the total payment for drugs. The number of prescriptions filled showed an increase. The number of persons served decreased by 12,042 (4.2 per cent); the number of prescriptions filled increased by 135,414 (3.8 per cent) and total payments increased by $2,761,519 (15.6 per cent). The average payment per prescription of $5.50 in 1977-78 represented an increase of $0.57 over the average paid in the previous fiscal year.

Table 22. Number of Recipients Receiving Prescription Drugs by Assistance Program, July 1977-June 1978

Program	Unduplicated Persons	Average Number of Persons Per Month	Number of Prescriptions	Total Payments	Average Payment Per Rx	Average Cost Per Person Per Year
TOTAL	273,377	101,591	3,714,555	20,418,549	5.50	74.69
Aged	63,470	39,098	1,711,065	9,503,837	5.55	149.74
Aid to Dependent Children	164,719	39,541	962,461	4,730,967	4.92	28.72
Disabled	33,271	18,788	875,867	5,238,143	5.98	157.44
General Relief	7,070	2,145	85,830	501,771	5.85	70.97
Blind	2,556	1,494	65,981	375,176	5.69	146.78
Blind Pension	269	143	5,571	32,180	5.78	119.63
Child Welfare Services-Foster Care	2,022	382	7,780	36,475	4.69	18.04

When distributed by program, the aged recipients required the largest number of prescriptions and total drug payments. AFDC recipients required 25.9 per cent of all precriptions while the aged required 46.1 per cent. The disabled required 23.6 per cent of all prescriptions. In terms of total dollars spent the aged required 46.5 per cent, the disabled required 25.7 per cent, and AFDC required 23.2 per cent. These data, by program, are given in Table 22.

DENTAL SERVICES

As of June 1978, a total of 1,433 dentists were participating in the dental program.

During the fiscal year, a total of 81,757 recipients were served at a total cost of $5,545,122 or a cost per person of $67.82. The number of persons utilizing dental services decreased by 3,927 (4.6 per cent) and total costs increased by $101,943 (1.9 per cent).

Table 23. Number of Recipients Receiving Dental Services by Assistance Programs, July 1977-June 1978

Program	Unduplicated Persons	Average Number of Persons Per Month	Total Payments	Average Payment Per Person Per Year
TOTAL	81,757	10,049	5,545,122	67.82
Aged	4,118	367	164,653	39.98
Aid to Dependent Children	70,178	8,747	4,891,345	69.70
Disabled	4,197	599	299,362	71.33
General Relief	1,575	138	80,022	50.81
Blind	309	37	17,559	56.83
Blind Pension	23	2	1,936	84.17
Child Welfare Services-Foster Care	1,357	159	90,245	66.50

SKILLED NURSING HOME SERVICES

As of June 1978, a total of 196 nursing homes participated in Missouri's nursing home program. Of these 196 homes, 11 were skilled nursing facilities only, 104 were intermediate care facilities only, and 76 were both skilled and intermediate nursing care facilities. Skilled nursing care services are provided only to recipient 21 years of age and over who are certified by Division of Family Services physicians as needing this type of care.

During the 1977-78 fiscal year a total of 528 different persons received skilled nursing home care at a total cost of $1,896,000. The average per diem cost to the program was $15.55. The average monthly number of nursing home patients was 317. Compared with the previous fiscal year, total costs showed a decrease of $2,793,814 (59.6 per cent) and the number of unduplicated persons receiving care decreased by 972. The decrease in persons and expenditures was primarily due to the creation of the new Intermediate Care Facilities (ICF) in 1974, which provides an intermediate level of service between the levels of service provided by skilled and practical nursing homes. The average monthly number of patients decreased by 578 or 64.6 per cent and the average per diem cost to the program increased by $1.50 (10.7 per cent). Skilled nursing home expenditures represented approximately 0.9 per cent of total expenditures for medical services during the fiscal year.

Table 24. Number of Persons Receiving Skilled Nursing Home Services and Expenditures, by Program, July 1977-June 1978

Program	Unduplicated Persons	Total Days Paid	Average Days Per Person Per Year	Total Cost	Average Number of Persons Per Month	Average Cost Per Day
TOTAL	528	121,967	231	1,896,300	317	15.55
Aged	339	93,364	275	1,440,431	247	15.43
Disabled	176	25,898	147	412,235	62	15.92
General Relief	3	678	226	11,745	1	17.32
Blind	9	1,849	205	28,905	6	15.63
Blind Pension	1	178	178	2,984	1	16.76

Of the average number of persons (317) in skilled nursing homes each month, 247 or 77.9 per cent were aged recipients; 62 or 19.6 per cent were disabled recipients, 7 or 2.2 per cent were aid to the blind or blind pension recipients, and 1 or 0.3 per cent were general relief recipients. The average payment per person per day was $15.55, and the average length of stay for an individual was 231 days, an increase of 3.6 per cent.

INTERMEDIATE CARE FACILITIES (ICF)

This is a relatively new vendor program which was started near the end of the 1973-74 fiscal year. The purpose of this program is to provide vendor payments for nursing care when an individual is in need of nursing care which is of slightly lesser degree than skilled nursing home care but a greater degree than offered by some practical nursing homes. Effective October 1975, the minimum age requirement for these services was 18.

A total of 14,946 individuals received services in intermediate care facilities during the 1977-78 fiscal year, with an average of 8,960 persons receiving intermediate care facilities services each month. These numbers represent an increase of 2,[illegible]8 (23.1 per cent) unduplicated persons receiving ICF services, and increases of 1,750 (24.3 per cent) persons receiving ICF services per month. The total expenditure for the year was $53,772,573 with an average program cost of $15.20 per day.

Table 25. Number of Persons Receiving Services in Intermediate Care Facilities, and Expenditures, by Program, July 1977-June 1978

Program	Unduplicated Persons	Total Days Paid	Average Days Per Person Per Year	Total Cost	Average Number of Persons Per Month	Average Cost Per Day
TOTAL	14,946	3,537,296	237	53,772,573	8,960	15.20
Aged	9,667	2,827,706	293	42,201,016	7,132	14.92
Disabled	4,976	638,900	128	10,440,649	1,646	16.34
General Relief	18	631	35	10,264	1	16.27
Blind	260	64,231	247	1,042,806	167	16.24
Blind Pension	25	5,828	233	77,838	14	13.36

Note: Totals exclusive of persons and payments for mentally retarded in Intermediate Care Facilities.

Of the average number of persons (8,960) in intermediate care facilities each month, 7,132 or 79.6 per cent were aged recipients; 1,646 or 18.4 per cent were disabled recipients; 181 or 2.0 per cent were aid to the blind and blind pension recipients; and 1 or 0.01 per cent were general relief recipients. The average length of stay for an individual was 237 days.

OUTPATIENT HOSPITAL SERVICES

Many different services are provided in hospital outpatient facilities, but approximately 85 per cent of total services rendered can be classified as radiology. As of June 1978, a total of 441 hospitals, including 279 outside the state, participated in the outpatient hospital care program.

The unduplicated number of individuals served during fiscal year 1977-78 was 153,497. The total costs for outpatient services during the fiscal year was $6,294,711. The average cost per patient per month was $19.50. Compared with the prior fiscal year, total costs increased by $378,318 (6.4 per cent), individuals served decreased by 4,545 (2.9 per cent) and the average cost per person per month increased by $2.09 (12.0 per cent).

Table 26. Number of Persons and Expenditures for Outpatient Hospital Services, July 1977-June 1978

Program	Unduplicated Persons	Total Payments	Average Number of Persons Per Month	Average Cost Per Person Per Month
TOTAL	153,497	6,294,711	26,894	19.50
Aged	23,146	834,567	3,503	19.85
Aid to Dependent Children	109,994	4,066,070	19,024	17.81
Disabled	13,424	1,076,099	3,160	28.38
General Relief	4,442	208,352	768	22.61
Blind	1,010	48,837	169	24.08
Blind Pension	75	2,670	12	18.54
Child Welfare Services-Foster Care	1,406	58,116	258	18.77

X-RAY AND LABORATORY SERVICES

X-ray and laboratory services providers are specialized facilities designed to conduct only outpatient laboratory and radiological tests. Services provided in the outpatient department of a hospital or in a physicians office are not included in these statistics but are included in outpatient hospital and physicians' services statistics. As of June 1978, a total of 83 independent clinical laboratories were participating in the X-ray and laboratory services program.

A total of 12,289 different individuals received the services at a total cost of $184,329 or an average user cost of $15.00.

MEDICARE SUPPLEMENTARY MEDICAL INSURANCE "BUY IN"

Beginning in July 1973 Medicare was expanded to include not only those over 65 years of age, but also those under 65 who have received Social Security Disability Insurance for more than two years. The Division of Family Services pays the Supplementary Medical Insurance premium for all cash recipients who meet their criteria, as well as medical assistance or vendor only recipients who receive supplementary security income payments and those adult cases converted to supplementary security income on January 1, 1974. However, general relief and blind pension recipients are excluded because they are entirely state funded and federal regulations limit "Buy In" to recipients of federally matched assistance programs. The total expenditures for the 1977-78 fiscal year were $6,426,421 which provided supplementary medical insurance for 70,299 recipients. This was a decrease of $207,852 (3.1 per cent) in cost and a decrease of 6,553 (8.5 per cent) recipients in comparison with the previous fiscal year. The decrease in persons and expenditures was primarily due to the declining caseload in the adult supplementation programs.

PAYMENTS ON BEHALF OF AGED RECIPIENTS IN PUBLIC MENTAL AND TUBERCULOSIS HOSPITALS

A part of Title XIX of the Social Security Act provides that a state may pay for medical services provided eligible individuals age 65 and over in public mental and tuberculosis hospitals. This has resulted in payments from the Division of Family Services to the Department of Mental Health and to the State Chest Hospital for medical services. The benefits to the state come from federal matching funds made available through Title XIX to the Division of Family Services which, in turn, makes payments for medical services to the Department of Mental Health and the State Chest Hospital.

A total of 687 different recipients were cared for in the five state mental hospitals at an average cost per year of $6,150 per patient. A total of $4,226,946 was paid to the Department of Mental Health during the fiscal year.

An average of 11 recipients were cared for each month in the State Chest Hospital at Mount Vernon, at an average cost per month of $289.68. A total of $38,238 was paid to the State Chest Hospital.

EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT OF RECIPIENTS UNDER AGE 21

As of February 7, 1972, early and periodic screening, diagnosis and treatment (EPSDT) was provided as a method of screening children under age 21. EPSDT is an attempt to locate potential and existing health problems in children and young adults. Effective January 1973, EPSDT became available to the following persons in addition to AFDC children and payees under age 21; GR recipients under age 21, Supplemental AE recipients under age 21, BP recipients under age 21, Supplemental NC recipients under age 21, MA recipients under age 21. An annual diagnostic examination is offered to this group of recipients at the time of the regular reinvestigations or approvals, however, acceptance of this service is voluntary. If a health problem is found, referral is made to the service worker for follow-up.

The total number of persons screened during fiscal year 1977-78 was 32,464, of which 20,766 were ages 6-20 and 11,698 were under age 6. Of the 32,464 individuals screened 5,200 (16.0 per cent) were referred for diagnosis and treatment.

Total payments for screening services for the year were $495,499 of which $190,529 were for children under age 6. There were payments of $442,835 for physicians' services and $52,664 for outpatient hospital services.

HOME HEALTH CARE SERVICES

Home health care services in addition to the services of physicians, dentists, physical therapists, and other services and items available to patients in their homes are provided for public assistance recipients age 21 or over or needy eligible relatives age 21 and over caring for dependent children. The patient must require skilled nursing services similar to those provided in a licensed skilled nursing home. Medicare benefits must be exhausted before the person is eligible for home health care services through Title XIX. There were 38 participating home health agencies in June 1978.

During the 1977-78 fiscal year home health care services were provided to 1,459 persons at a total cost of $301,441. This was an average user cost of $206.61.

EMERGENCY AMBULANCE SERVICE

Emergency ambulance service is provided if the attending physician certifies that the services are medically necessary. By June 1978, 297 ambulance services were participating in this program, with 64 of these outside the state.

During the 1977-78 fiscal year, a total of 9,631 persons received emergency ambulance services at a total cost of $289,967, an average user cost of $30.11.

OPTOMETRIC SERVICES

Optometric services were added to the services provided under Title XIX as a result of legislation enacted by the Seventy-sixth General Assembly (Second Regular Session) and became effective October 1972. One visual examination per year by a participating optometrist is provided for persons eligible for Title XIX and the cost of the examination must not exceed $12. Glasses are provided under this service as of November 1, 1973 for persons under 21 years of age.

A total of 23,960 persons received optometric services during the 1977-78 fiscal year at a cost of $599,191, an average of $25.01 per person. Approximately $351,000 of the total cost of $599,191 was spent for glasses.

FAMILY PLANNING

Public Law 92-603, effective October 30, 1972, requires that family planning services be offered to all appropriate clients. Payments for these services can be made under Title XIX for the cost of visits to a physician, impatient hospital or outpatient hospital clinic and for birth control pills and other prescriptions. Any person is free to accept or reject a referral for such services, and the decision does not affect the receipt of assistance or other services from the Division of Family Services.

Family planning services were provided to 31,564 different individuals during the fiscal year at a total cost of $1,152,870. Physicians' services cost $537,004 (46.6 per cent of the total). Drug expenditures were $372,124 (32.3 per cent), inpatient hospital expenditures were $230,839 (20.0 per cent) and outpatient hospital expenditures were $12,902 (1.1 per cent). About 96.7 per cent of those receiving family planning services were aid to dependent children recipients.

STERILIZATION AND INTERMEDIATE CARE FACILITIES FOR THE MENTALLY RETARDED AND RELATED CONDITIONS

Late in fiscal year 1975-76 Title XIX programs for sterilization and intermediate care facilities for mentally retarded age 18 and over and related conditions were begun. During the year, 1,716 sterilizations were performed at a total cost of $489,005, ICF became available for retarded persons and related conditions such as epilepsy, cerebral palsy and other developmental disabilities age 18 or over. During the year, there was a monthly average of 1,246 recipients of ICF-MR at a cost of $19,943,101.

MEDICAL ASSISTANCE

Effective January 1, 1974, claimants could apply for medical assistance if they were ineligible for any other of the state supplemental programs, or categorical programs. (Persons eligible for these programs are automatically eligible for medical assistance.) These claimants would not only have to meet requirements in effect January 1, 1972 for the former aged, disabled, and aid to the blind programs, but also would have to qualify under specified adjusted gross income requirements. If a claimant's adjusted gross income was less than set out in the Social Security Act, as amended, and other eligibility factors are met, he would be eligible for medical assistance. However, if eligible with reference to other requirements but not eligible on the basis of income, a special "spenddown" procedure is necessary. Briefly, this procedure

requires computing the amount a claimant must spend for medical expenses from his own income, in a quarter. Of this amount, in addition to other deductions including his adjusted gross income exceeds his current income, eligibility for medical assistance is established for the remainder of the quarter.

During fiscal year 1977-78, applications received totaled 33,570. Of these, plus the applications pending in July 1977, 34,164 were disposed of, 21,558 applications were approved and 12,606 were rejected. At the end of June there were 3,164 applications awaiting disposition.

Table 27. Applications for Medical Assistance Received, Disposed of, and Awaiting Disposition at End of Month, July 1977-June 1978*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month/
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	33,570	34,164	21,558	12,606	XXXX
1978					
June	3,207	3,205	2,008	1,197	3,164
May	3,058	2,955	1,960	995	3,164
April	2,989	3,027	1,863	1,164	3,062
March	3,200	3,447	2,294	1,153	2,900
February	2,578	2,372	1,483	889	2,791
January	2,462	2,603	1,568	1,035	2,609
1977					
December	2,361	2,538	1,492	1,046	2,636
November	2,462	2,572	1,591	981	2,788
October	2,816	2,896	1,694	1,202	2,898
September	2,777	2,942	1,853	1,089	2,978
August	2,928	2,976	2,020	956	3,089
July	2,732	2,631	1,732	899	3,150

(Data for all months except June 1978 are estimated.)

*For monthly data prior to July 1977, see Annual Report for Division of Family Services, 1976-1977, p. 63.

**Includes such reasons as death, change of residence, and voluntary withdrawal.

/Figure does not always agree with number carried over as pending at first of following month due to adjustment in previous figures.

PART V

SOCIAL SERVICES PROGRAM

A major function of the Missouri Division of Family Services is to provide social services under Titles IV-B, IV-C, and XX of the Social Security Act and under various State laws. The social service delivery system administered by the Division of Family Services is directed toward achievement of one or more of the following goals:

(1) Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency;

(2) Achieving or maintaining self-sufficiency, including reductions or prevention of dependency;

(3) Preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitation or recruiting families.

(4) Preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care; or

(5) Securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions.

The following services are available through Division of Family Services to eligible individuals to assist them with achieving one or more of the above goals:

Counseling
Family planning
Information and referral
Investigation of abuse, neglect or exploitation
Placement
Service plan development
Alternative care
Day care for children
Day care for adults
Evaluation and diagnosis
Home delivered or congregate meals
In-home services
Legal assistance
Transportation
Skill development
Social development
Detoxification
Educational services
Winterization
Half-way house

Eligible individuals include:

(1) Recipients of aid to families with dependent children, aid to families with dependent children in foster care, supplemental security income, or state supplemental payments.

(2) Individuals whose income does not exceed 80 per cent of the state median income as adjusted for family size.

(3) Any child or persons responsible for the child's care, custody or control or persons who otherwise affect the child's development and well-being on whom a report of abuse, or neglect, or exploitation has been made; or a child who has been identified as being at risk of abuse, neglect, or exploitation; or a runaway minor who has left his/her place of abode without consent of parent, guardian, or other person acting in the capacity of parent.

(4) Individuals requesting only information about or referral for services.

Special client groups to whom services are directed are as follows:

Abused, neglected or exploited children
Children at risk of abuse, neglect, or exploitation
Runaway children
Aged, blind, or disabled individuals
Public housing residents
Vietnamese and Cambodian refugees
Parents employed or in training
Hard-to-place adoptive children
Alcohol and/or drug abuse
Adult offender
Juvenile offender
Ex-AFDC

The following is a description of Social Services Program areas:

1. Alternative Care

This is a statewide service program designed to provide substitute family care or non-familial group care for children who are determined by the juvenile court as needing care in a setting other than their natural family home. Alternative care may be provided in any one of three types of licensed foster settings: (1) foster family homes, (2) foster group facilities and (3) residential treatment facilities. Acceptance of any child referred by the court for placement is dependent on the availability of sufficient funds to pay the costs of care and the current availability of an appropriate care setting based on the child's individual alternative care needs.

Available services to children in alternative care settings always include room and board at standardized rates, an initial clothing allowance, payment of regular incidental expenses and medical expenses, and payment of special medically-related and non-medically-related expenses when these expenses are certified necessary to the child's care. In addition, a varied range of treatment services such as educational services and skill development services may be provided in behalf of children who are placed in residential treatment facilities.

Funding Sources:

a. A match of state and federal funds under Title IV-A for payment room and board of AFDC eligibile children alternative care settings. By statute, AFDC payments cannot exceed $100 per month per child.

b. A match of state and federal funds under Title IV-E for payment of the following alternative care costs:

   (1) Room and board for all non-AFDC eligible children in alternative care.

   (2) Supplemental payment to room and board costs for AFDC eligible children in alternative care.

   (3) Initial clothing expenses.

   (4) Regular medical expenses.

   (5) Special medically-related and non-medically-related.

c. A match of state and federal funds under Title XX for payment of the following alternative care costs:

   (1) The first 6 months of room and board for children placed in a residential treatment facility:

   (2) All treatment costs for the duration of a child's placement in a residential treatment facility.

2. Subsidized Adoption

This is a statewide program developed to provide financial benefits in the form of "subsidy payments" to encourage potential adoptive parents to adopt and finance the cost of adopting hard-to-place children. Beneficiaries of adoption subsidy include any child in adoptive placement who is de-

termined to have been "previously unadoptable" because of a handicapping condition racial or ethnic minority status, age, social maladjustment, or membership in a sibling group which was unadoptable.

One or all of the following types of subsidy payments may be made in behalf of a child in this program:

a. Regular monthly room and board payments of the same standardized rates as those for alternative care.

b. Recurring payment for treatment of a physically handicapping or other mental or emotional condition which existed at the time of placement.

c. A one-time special services payment to cover a non-recurring medical, dental, psychiatric or health expense, or an expense associated with the adoptive process.

Funding Source:

100 per cent State appropriated funds.

3. Unmarried Mother Services

This is a statewide service program which provides services and payments to young unmarried or separated mothers with an unwanted pregnancy.

Financial payments may be provided to or in behalf of these clients at standardized rates to assist them with the cost of living in any one of three types of settings: (1) independent living arrangement, (2) alternative care in a foster home, and (3) alternative care in a maternity home.

Additional services to these clients include counseling by Division of Family Services social services staff and payment of all medical care expenses incurred during pregnancy, delivery, and post-natal care.

Funding Source:

100 per cent State appropriated funds.

4. Purchase of Service (POS)

This program provides for the purchase of a varied range of social services statewide and local, public and private, proprietary and non-profit vendors under a contractual agreement for the purpose of serving a specified client

population within a designated geographic area, at a negotiated unit rate, in accordance with specified service standards.

Services Available:

Counseling
Family planning
Service plan development
Alternative care/residential treatment
Day care for adults
Day care for children
Evaluation and diagnosis
Home-delivered or congregate meals
Legal assistance
Transportation
Skill development
Social development
Detoxification
Educational services
Winterization
Half-way house

Funding Sources:

A match of locally donated and/or state appropriated funds with federal Title XX funds.

5. Vendor Day Care

The Vendor Day Care Program is a statewide program which provides for the purchase of day care services from qualified vendor agencies and individuals for children of Income Maintenance-AFDC recipients families where one or both caretaker relatives are employed or are in training for employment.

Funding Sources:

A match of state appropriated funds with either Title XX or Title IV-C funds, depending on the client group.

6. Direct Service Delivery

This is a statewide service delivery program in which Division of Family Services employed social service staff provide a range of case planning, investigative, counseling, and placement services to children and families for the purpose of preventing or remedying abuse, neglect, or exploitation of children, and for the preservation of re-

habilitation of families with a potential or actual child abuse/neglect problem. A limited number of staff also provide treatment services in the area of adult abuse, neglect, and exploitation, and counseling and referral for AFDC clients in the area of family planning.

A match of state appropriated funds and federal funds under Title IV-B and Title XX.

7. Vendor In-Home Services

This is a statewide program which provides for the purchase of Homemaker and Chore Services from qualified vendor agencies at standardized rates for all eligible individuals and families in need of these services. The primary emphasis of this program is the provision of household maintenance and personal services to homebound elderly and families to assist them in achieving or maintaining self-sufficiency, to prevent or reduce inappropriate institutionalization of the elderly, or to prevent or reduce family breakup or unnecessary foster care placement of children in child abuse/neglect situations.

Funding Source:

A match of locally donated or state appropriated funds and federal Title XX funds.

8. WIN

The WIN (Work Incentive) program provides supportive services to income maintenance recipients who are voluntarily or mandatorily registered in the WIN program because they are available for work or for work training. Services provided under this program are intended to contribute directly to immediate job placement of clients. This program is currently operated only in selected project areas within the State, including the major metropolitan and urban areas.

The WIN program is jointly administered by the Division of Employment Security and Division of Family Services who have joint responsibility for assessing registrant employability potential, appraising and certifying registrants, establishing the client employability plan, and providing social and employment services.

Funding Sources:

A match of state and federal funds under Title IV-C and under Title XX. Title XX funds are utilized in this program only if Title IV-C funds become exhausted during the fiscal year.

9. Child Abuse/Neglect Reporting

This manual reporting system was established for the purpose of accepting reports of suspected or actual child abuse, neglect, or exploitation at a centralized confidential receiving station from any mandatory or permissive reporter within the State of Missouri. Reports from the public are communicated to the Central Registry Unit for Child Abuse and Neglect via toll free telephone hotline which is manned by Division of Family Services staff on a 24-hour continuous basis.

The Central Registry Unit has the functions of maintaining a central file or registry of all reports . incidents of child abuse neglect and transmitting each report made via the hotline to the appropriate Division of Family Services local office for investigation by Division of Family Services staff. The central registry serves as a source of historical data which is accessed each time a new report is received through the hotline. Any data regarding a previous report(s) which is found to be pertinent to a newly reported incident is transmitted to local staff responsible for performing the investigation. This is intended to serve as a resource for staff carrying out the investigation and to facilitate more fully informed case planning and service delivery to these clients.

All investigations must be performed within 24 hours after the report is referred to the local office by the Central Registry Unit, and the results of each investigation must then be transmitted back to the Central Registry Unit within this same 24-hour period so that the central registry can be updated. A final status report must be submitted to the Central Registry Unit by local Division of Family Services staff within (30) working days of the receipt of each initial report which identifies current dispositional information and services offered and accepted.

Statistical summary information is extracted from the central registry periodically to develop reports for the National Clearing House for Child Abuse/Neglect and for other state planning functions with regard to child abuse/neglect treatment and social service delivery.

10. Interstate Compact on the Placement of Children

The Interstate Compact on the Placement of Children (ICPS) establishes a legal procedure to guarantee suitable care and protection of children in the custody of child-caring placing situations, who must be placed in an alternative care or adoption setting either out of state or internationally.

The Compact has been enacted by the State of Missouri and by a majority of other states. It provides for uniform child placement services and procedures by all compact member states, including the full investigation and evaluation of a proposed out-of-state placement to be communicated between state Compact Administrators via uniform documents prior to the child's actual placement. The process specified by the Compact is intended to ensure both a suitable placement environment and appropriate jurisdictional arrangements for each child involved in an interstate or international placement.

Funding Source:

A match of state and federal funds under Title XX.

11. Foster Care Tracking

The purpose of Foster Care Tracking is to secure basic descriptive data on all children currently placed in an Alternative Care Foster Care Setting, and to follow the movement of each child who is involved in one or more placements. Statistical and other administrative reports are then generated as a result of demographic and placement data collected through an automated system and used for evaluating current alternative care placement trends, volumes, and characteristics of children entering alternative care.

During the 1977-78 fiscal year, 1,212 children in foster care were returned to their home after treatment services, while 2,110 children were under the long term foster care plan as of June 30, 1978. There were 5,377 children open for foster care at the end of the 1977-78 fiscal year.

12. Adoption Exchange

The Adoption Exchange of Missouri (AEM) was established to facilitate the adoptive placement of children statewide by maintaining descriptive information regarding prospective adoptive children and parents in a centralized registry.

Information contained in the Exchange may be submitted by and shared among all licensed child-placing agencies who participate in the Exchange. Consent is obtained from or in behalf of all children and families who are registered within the Exchange, including the juvenile court if necessary. The exchange serves only as an informational resource to cooperating adoption agencies, and does not attempt to supervise the legal process of social service delivery which pertains to individual adoptions, as these functions remain the sole responsibility of the adoption placement agencies throughout the adoptive process.

There were 196 children registered in the Adoption Exchange of Missouri as being free for adoption at the end of the 1977-78 fiscal year. Of these children, all were considered to be hard to place, as defined, by having special needs. The adoption Exchange of Missouri facilitated the placement of 61 children in adoption during Fiscal Year 1978. This was a placement rate of 31 per cent. For Division of Family Services as a whole, approximately 540 children were placed in an adoptive home. This was a universe of 140 children, and was the result of the emphasis placed by the Division on finding adoptive placements for children who had been with foster parents.

The following is a statistical summary of the number of clients open by eligibility category at the end of the 1977-78 fiscal year:

Eligibility Category	Clients
Income Maintenance	65,801
Income Eligible Recipient (free)	72,271
Protective Service Recipient	18,879
Information and Referral Only Recipient	1,317

The following is a statistical summary of the number of clients open by goal at the end of 1977-78 fiscal year:

Achieve or maintain through employment an individual's maximum level of economic independence	18,454
Achieve or maintain an individual's or a family's maximum level of independent living	95,465
Prevent or remedy abuse, neglect, or exploitation of children and adults unable to protect their own interests	27,381
Prevent or reduce inappropriate institutionalization of individuals	16,442
Secure institutional care when it is appropriate for the individual	516

The following is a statistical summary of the number of clients reported for child abuse and neglect during the 1977-78 fiscal year:

Number Substantiated Reports	13,223
Number Unsubstantiated Reports	7,121

LICENSING OF CHILD CARE HOMES, AGENCIES, AND RESIDENTIAL HOMES

DAY CARE LICENSING

By Statute, the Missouri Division of Family Services is delegated the responsibility of licensing day care facilities which provide care to more than four children, and for establishing uniform regulations and standards to be met for licensing issuance. The standards are minimum standards as intended by Statute. The purpose of licensing is to give parents assurance that undue hazards do not exist, and that the child's daily experiences are conducive to wholesome growth and development. The investigation and supervision of day care facilities is done by designated day care licensing staff. Visits are made on a quarterly basis, on both an announced and unannounced basis, to assure that standards are being maintained. Consultation and technical assistance is also offered through the licensing process. The number of children in licensed child care is rapidly increasing in recent years. Particularly noticeable has been the increase in use of day care centers versus day care homes.

Table 28. Licensed Day Care Homes and Group Facilities, as of June 1978

Type of Day Care	Number of Facilities Licensed	Capacity of Licensed Facilities
TOTAL	1,542	30,060
Family Day Care Homes	828	4,639
Group Day Care Facilities	714	25,421
Voluntary	529	
Independent	185	

RESIDENTIAL LICENSING UNIT ACTIVITIES

Under the statutory authority of Sections 210.201 - 210.245, RSMo. 1969, the Residential Licensing Unit is responsible for the licensing of private facilities providing twenty-four hour care to dependent, neglected and emotionally disturbed children, including group homes and child caring agencies, and for the licensing of private child placing agencies providing foster and adoptive services. These licensed facilities are monitored through inspections conducted several times annually to insure maintenance of standards and compliance with the law and applicable rules.

The unit is also responsible for the development, promulgation and issuance of uniform rules which establish standards of service and care to be rendered by the licensed agencies to children. Technical assistance and/or consultation is available through the Residential Licensing Unit to upgrade the quality of services provided by the group homes, child caring and child placing agencies.

At present there are 76 licensed or approved residential facilities and 22 licensed or approved child placing programs or agencies, serving approximately 1,800 children. Children placed in residential care are referred by the juvenile courts or voluntarily by parent(s) or parent substitutes and are in need of care, treatment and other specialized services. Other children may need permanent placement through adoption and the child placing agencies provide these services to children.

PART VI

SERVICES FOR THE BLIND

In addition to providing financial assistance to blind persons in Missouri through the aid to the blind and blind pension programs, the Division of Family Services also administers four service programs for the blind. These are prevention of blindness, rehabilitation teaching, vocational rehabilitation, and services to blind children and their parents.

The prevention of blindness program provided for eye examinations to medically indigent persons for prevention of blindness and restoration of sight, through treatment or surgery.

As indicated in Table 29, a total of $191,173 was spent for services under the prevention of blindness program during the 1977-78 fiscal year. This was a decrease of $1,225 (0.6 per cent) under the previous year. The largest single item of cost was for purchase of glasses.

Table 29. Type of Services Provided by Prevention of Blindness by Amount of Expenditures, July 1977-June 1978

Type of Service	Amount
Total Expenditures	$191,173
Glasses	57,217
Hospitalization	53,560
Surgery	33.984
Eye examinations and refractions	26,450
Artificial eyes	8,169
Drugs	4,102
Other*	7,691

* Includes physical examinations, tests, laboratory fees, X-rays, and other necessary medical procedures.

During the fiscal year a total of 2,885 services were provided. In addition, a total of 1,295 persons were examined at 13 clinics held throughout the state. There was a decrease of 108 examinations (7.7 per cent) over the preceding year. Examinations showed that glaucoma, cataract, diabetic retinopathy, and strabismus (in children) were the most prevalent eye conditions.

The types of services given by rehabilitation teachers are shown in Table 30. This shows that casework services is the most frequent service offered and was received by 996 persons during the year. Other leading services were adjustment to blindness received by 759 persons and distinguishing money by 180 persons. Referrals made by rehabilitation teachers during the year included 59 to vocational rehabilitation, 384 for library services, and 69 for radio reading services.

Table 30. Type of Instructions Given Under the Rehabilitation Teaching Program for the Blind, During Fiscal Year 1977-78

Type of Instruction	Number
Casework service	996
Adjustment to blindness	759
Distinguishing money	180
Cooking	168
Script writing	128
Travel techniques	122
Telephone dialing	120
Telling time	117
Table techniques	68
Sewing	61
Grooming	58
Braille writing - slate and stylus	53
Therapeutic crafts	45
Cleaning	37
Recreational skills	19
Laundering	14
Remedial academic skills	5

Table 31 shows fiscal year statistics covering the rehabilitation teaching program. This shows that 773 cases were open for services at the beginning of the year and an additional 575 cases were accepted during the year, making a total of 1,348 active cases. Services were discontinued to 577 cases, leaving 771 active at the end of the year.

Table 31. Turnover Report on Rehabilitation Teaching Cases for the Blind, July 1977-June 1978

Item	Number
Total cases at beginning of fiscal year	773
Opened for service during year	575
Total cases during year	1,348
Total cases closed during year	577
Total cases at end of year	771

Persons rehabilitated to employment represents a savings in tax funds in that they become employed and self-supporting individuals who otherwise would be in need of assistance.

Table 32. Active Vocational Rehabilitation Cases for the Blind and Cases Closed from Active Load, July 1977-June 1978

Item	Number
Active cases on hand at beginning of year	737
Accepted for services during year	417
Total in active load during year	1,154
Total cases closed during year	346
Placed in employment	290
Closed other reasons - After rehabilitation plan initiated	40
Closed other reasons - Before rehabilitation plan initiated	16
Total active cases at end of year	808

Administration costs for vocational rehabilitation services totaled $1,243,030 or 49.2 per cent of total costs and went for salaries, travel, Social Security, and Missouri retirement costs.

Case services purchased for persons served totaled $1,281,496 or 50.8 per cent of total costs and including diagnostic and physical restoration services, training, maintenance, transportation and other services.

Table 33. Expenditures for Vocational Rehabilitation Services for the Blind, by Type of Expenditure, July 1977-June 1978

Type of Expenditure	Amount
TOTAL EXPENDITURES	2,524,526
Federal Share	2,093,685
State Share	430,841
Administration: (Total)	1,243,030
Salaries of Employees	795,299
Additions:	
Equipment	18,358
Repairs:	
Office Equipment	1,040
Supplies	5,599
Communications	19,386
Building and Ground Expense	39,491
Travel	107,376
Professional and Technical Services	5,295
Other Services	161,253
OASDI, Missouri Retirement and Insurance (Federal Fund Only)	89,933
Case Services Purchased for Clients	1,281,496

Under the Federal Randolph-Sheppard Act, a vending facility program was started in June 1945 as a part of vocational rehabilitation of the blind. Blind persons who meet the requirements of the above act may make applications to become vending facility operators. Equipment is supplied jointly from state and federal funds. Business Opportunities for Missouri Blind, Inc., which is sponsored by Missouri Lions Clubs, cooperates in the administration of this program.

At the end of the fiscal year there were 51 vending facilities with 49 blind operators. Total gross sales of the vending facilities amounted to $3,237,422 which was an increase of $178,431 over the previous fiscal year. Net income paid to operators totaled $686,362. The average annual earnings of the vending facility operators was $14,065.

Professionally trained teacher/counselors provide services to pre-school blind children throughout Missouri. The purpose of services to visually impaired children and their parents is to offer individual counseling and educational programs and to coordinate community services in order that the pre-school blind child may acquire developmental skills and basic concepts to ready him for the regular educational process given to all children. For the blind children who cannot reach this optimum level of development these workers act as consultants to other educational opportunities so the child can reach the highest degree of development possible consistent with his level of progress at the age of six.

PART VII

CHILD SUPPORT ENFORCEMENT (IV-D)

The adoption of HB-601, July 1977, enabled Missouri to establish a Child Support Enforcement Program. Missouri was the last state in this country to adopt enabling legislation for Child Support Enforcement (IV-D). The primary purpose and the immediate result is a lower AFDC cost to the taxpayer. The secondary purpose of the program is to help children attain the right to receive support from their absent parent and the right to have their fathers identified so that support can be obtained. There are two distinct and separate programs operated by the Support Enforcement Unit. First, there is the program for clients who receive AFDC. The AFDC payee makes an assignment to the State of all past, present, and future child support. This assignment remains in effect until the AFDC case is closed. After the closing, it remains in effect for delinquent past child support. The State provides location, enforcement and collection services at no cost to the client while she receives AFDC payments. The child support is collected, submitted to the State, compared with the AFDC grant and distributed according to Federal regulations. To defray the cost of the AFDC program, 39.34 per cent of all support collected is retained by the State. Any child support collected that exceeds the amount of AFDC payments is returned to the client when the AFDC case is closed.

A second program is provided for those parents who do not receive AFDC who apply for location, enforcement, and collection services through the Support Enforcement Program. These applicants are charged a fee based on a sliding scale according to their income. The child support is paid directly to the custodial parent and none of it is retained by the State.

The amount of collections for the Child Support Enforcement program for the Fiscal Year 1978, by District, is shown below:

District*	Total	AFDC	Non-AFDC
Total	$2,643,865.80	$2,495,293.81	$148,571.99
District I	276,716.52	272,353.16	4,363.36
District II	675,438.14	694,032.04	26,406.10
District III	980,722.89	894,451.79	86,271.10
District IV	710,988.25	679,456.82	31,531.43

* District I is St. Louis City. District II includes St. Louis County and 21 counties South which includes the Bootheel Area. District III includes 43 counties North of the Missouri River. District IV includes 51 counties in Southwest and South Central sections of the State.

The cost of administering this program is reimbursable at 75 per cent federal funds and the payment for this cost is supported by collections from the AFDC program. In other words, the cost of location, enforcement, and collection for the non-AFDC program is met through the amount of child support collected by the State in behalf of those clients who do receive AFDC. The value of the non-AFDC program lies in the fact that by providing child support services for these clients they are able to manage financially without receiving AFDC benefits from the State.

PART VIII

SUMMARY OF EXPENDITURES AND SOURCES OF FUNDS

The last section of the 1977-78 report is devoted to a review and analysis of expenditures and the sources from which funds were received.

State appropriations are made for the fiscal year are accordingly specific in the amount available during the fiscal year. Federal funds are appropriated on the basis of all grants, contributions or allotments received, and therefore the total amount of federal funds available could not be determined until these funds were actually earned. For comparative purposes, the amounts of federal funds available are considered to be the appropriation of federal funds.

Federal matching funds are made available for payments to dependent children, and for payment for medical care for dependent children, aged, blind, and disabled recipients. The Federal participation for public assistance payments is at the rate of 60.66 per cent of matchable amounts.

The medical assistance program under Title XIX provides vendor payments to suppliers of medical care services and is matched separately from the cash assistance programs.

During the 1977-78 fiscal year, a total of $518.8 million in state and federal funds were expended for assistance payments and administration, Table 34. This was an increase of $59.1 million (12.8 per cent) over the prior fiscal year.

Of total costs, $444.0 million or 85.6 per cent went for money payments to welfare recipients, vendor payments for medical care, foster care payments, aid to families with dependent children, work training, and day care costs. Of this total, $255.5 million or 57.5 per cent were federal funds and $188.5 million or 42.5 per cent were state and local funds.

Compared with the preceding fiscal year, Federal funds for assistance payments showed an increase of $48.1 million or 23.2 per cent, and state and local funds increased by $1.4 million or 0.7 per cent.

The largest increase in total assistance expenditures was for Medical Assistance (Title XIX plus Buy In) which totaled $213.8 million or an increase of $47.2 million (28.3 per cent). Expenditures for aid to dependent children totaled $146.4 million, an increase of $4.4 million (3.1 per cent).

Table 34. Expenditures Charged Against All Funds for Assistance and Administration, Classified by Programs and Source of Funds, July 1, 1977-June 30, 1978

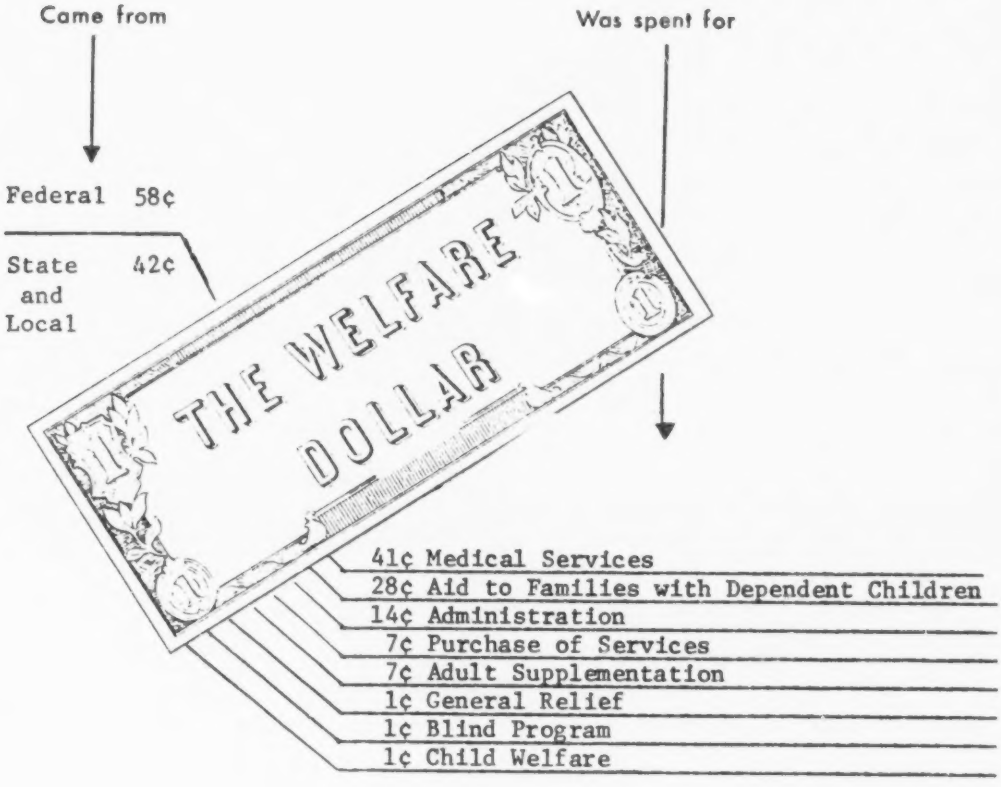
Program	Source of Funds			
	Total	Federal	State	Local
ALL EXPENDITURES	518,858,655	303,145,945	213,525,912	2,186,798
Assistance for Recipients	444,071,090	255,489,271	187,432,600	1,149,219
Aid to Dependent Children	146,394,304	88,199,257	58,195,047	
Blind Pensions	391,440		391,440	
Adult Supplementation	14,073,929		14,073,929	
Blind Supplementation	2,967,436		2,967,436	
General Relief	3,919,656		3,845,588	74,068
Nursing Care	19,205,453	474,475	18,730,978	
Homeless, Dependent, Neglected Children	6,964,368	1,376,132	4,513,085	1,075,151
Purchase of Day Care	5,492,089	5,152,545	339,544	
Homemaker and Chore Services	1,326,562	926,672	399,890	
AFDC Work Training	294,025		294,025	
Purchase of Services Expenditures to Organizations	28,917,385	28,917,385*		
Child Abuse and Neglect - Multi-Disciplinary Treatment	312,445	234,334	78,111	
Medical Assistance, Title XIX	213,811,998	130,208,471	83,603,527	
Reinbursement Under Title IV-D, Child Support Enforcement	1,640,056	1,273,563	366,493	
Reimbursement to Counties	1,273,563	1,273,563		
Federal Reimbursement and Local Incentives	366,493		366,493	
Administrative Expense	73,147,509	46,383,111	25,726,819	1,037,579
Administration of: ** Income Maintenance, Social Services, Medical Services and Administrative Services	53,835,266	32,513,241	21,244,111	77,914
Food Program	6,641,105	3,295,781	3,345,324	
Purchase of Social Services	3,838,658	2,878,993		959,665
Research and Demonstration Proj.	111,406	111,406		
Blind Administration & Services	2,707,551	1,887,235	820,316	
Title IV-D Child Support Enforcement	1,268,271	951,203	317,068	
OASDI, Mo. Retirement and Insurance (Federal Funds Only)	4,745,252	4,745,252		

* Appropriated as Federal and Other Funds.

** Percentage of Total Funds: Income Maintenance, 41 per cent; Social Services, 29 per cent; Medical Services, 3 per cent; and Administrative Services, 27 per cent.

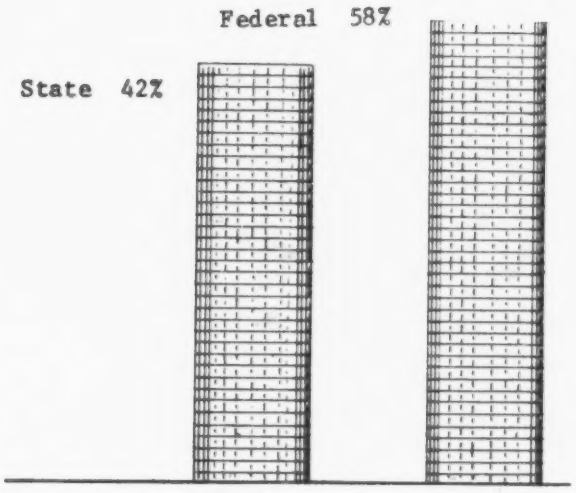
THE WELFARE DOLLAR

Fiscal Year July 1977–June 1978



EXPENDITURE BY SOURCE OF FUNDS

Fiscal Year 1977-1978



Costs of administration by specific item of administration are given in Table 35. This shows total expenditures of $73.1 million which was an increase of $7.9 million (12.2 per cent) over the prior fiscal year.

Table 35. Administrative Costs by Object of Expense, July 1, 1977-June 30, 1978

Object of Expense	Total	General Administration	Food Program	Child Support Enforcement	Blind
TOTAL	73,147,509	61,877,355*	7,125,258	1,347,412	2,797,484
Salaries of Employees	54,566,597	47,086,283	5,587,691	916,133	976,490
Additions:					
Office and Operative Equipment	436,511	289,655	17,809	110,612	18,435
Repairs and Replacements:					
Building, Office and Operative Equipment	32,952	30,773	1,216		963
Supplies	1,104,387	1,050,472	29,254	16,446	8,215
Communications	2,431,735	2,244,612	75,887	94,466	16,770
Building and Ground Expense	3,055,689	2,899,198	65,271	52,360	38,860
Travel	2,436,149	2,141,974	96,103	66,632	131,440
Data Processing Expense	794,811	764,120	26,745	3,946	
Professional and Technical Services	1,939,112	1,177,262	739,585	7,676	14,589
Other Services	122,302	100,981	1,544		19,777
Case Services for the Blind	1,482,012				1,482,012
OASDI, Mo. Retirement and Insurance (Federal Fund Only)	4,745,252	4,092,025	484,153	79,141	89,933

* Includes $3,838,658 for Purchase of Social Services Administration.

Of the total costs of administration $54.6 million or 74.6 per cent went for staff salaries. This item showed an increase of $5.2 million or 10.4 per cent over the prior fiscal year. Other large expenditures were for OASDI and state retirement, $4.7 million, buildings and grounds expenses, $3.1 million, communications, $2.4 million, travel, $2.4 million, and professional and technical services, $1.9 million.

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APPENDIX A.

CHRONOLOGIES OF ACTIVITIES AFFECTING PROGRAMS

September 1, 1977	Physician's fees increased by approximately 10 per cent for the most common and frequently performed medical services.
September 19, 1977	The budget to determine eligibility on the basis of need must be based on the full need standard (100 per cent of the consolidated standard), rather than the percentage of need standard (65 per cent of the consolidated standard). This change in policy was effective immediately.
September 30, 1977	The Federal-funded program for assistance to Indochinese refugees ended on this date.
October 1, 1977	The Missouri Division of Family Services in administering the Missouri Title XIX Medicaid program can only provide payment to a physician for laboratory services performed by him or under his personal supervision. If laboratory services is not performed by a physician or under his supervision, Medicaid payment is only available to the facility performing the test.
November 1, 1977	The Department of Labor and Department of Health Education and Welfare in conjunction with the Division of Employment Security, and the Division of Family Services have decided to expand the WIN program in Missouri. Because of this, Audrain and Newton Counties had a WIN program.
November 30, 1977	The maximum payment for a visual examination to determine AB and BP eligibility became $20. If the claimant was unable to travel and a home visit was required, an additional $5 was still allowed to cover the physician's travel cost.
December 1, 1977	As the result of Udina vs. Graham, the section in the state law covering transfer of property (208.010(2)) was declared void, and was no longer considered in determining eligibility for public assistance.

January 1, 1978	The Social Security Administration increased the deductible and coinsurance under the Title XVIII (Medicare) Program. The Missouri Division of Family Services continued to pay the deductible and coinsurance owed on Title XIX covered services for Title XIX eligible patients subject to the Title XIX limitations in effect at the time of service. The amount effective with "spells of illness" beginning during the calendar year 1977 was as follows: Inpatient hospital deductible - $144.00; coinsurance for the 61st through 90th inpatient hospital day - $36.00 per day; coinsurance for the lifetime reserve days - $72.00 per day; and skilled nursing facility coinsurance - $18.00 per day.
January 1, 1978	As a result of passage of House Bill 578, County Courts would no longer have any responsibility in paying for the care of Homeless, Dependent, and Neglected Children. Effective this date these costs would be paid for entirely by the State, through the Division of Family Services.
January 1, 1978	Senate Bill 334 which provided for payment of partial dentures and full dentures for eligible Medicaid recipients 21 years of age and over under the Title XIX Dental Program became effective. However, funding was not made available until May 1, 1978.
May 1, 1978	In compliance with Senate Bill 334, the Division of Family Services extended the present coverage of optical materials to all eligible Medicaid recipients, regardless of age. Thus, the limitation that the recipient must be under 21 years of age no longer applied.
June 19, 1978	Children under age 21 who received SSI were eligible for Title XIX benefits if all AFDC eligibility requirements were met. SSI children's eligibility for Title XIX is to be determined in the same manner as 18 to 21 years old non-students eligibility for Title XIX was determined.

APPENDIX B. SUPPLEMENTARY STATISTICAL TABLES

Table I. Average Monthly Number of Recipients Under Programs Administered by the

County	AFDC		
	Families	Children	Persons
STATE TOTAL	72,425	152,987	213,693
Adair	165	321	451
Andrew	90	185	260
Atchison	67	125	179
Audrain	261	508	719
Barry	234	462	646
Barton	67	125	181
Bates	144	311	432
Benton	113	218	317
Bollinger	117	240	340
Boone	745	1,471	2,055
Buchanan	1,196	2,381	3,379
Butler	841	1,759	2,458
Caldwell	48	95	136
Callaway	260	511	712
Camden	155	287	421
Cape Girardeau	488	958	1,351
Carroll	130	258	367
Carter	85	176	250
Cass	298	538	779
Cedar	100	195	271
Chariton	110	210	296
Christian	174	330	470
Clark	54	126	170
Clay	799	1,444	2,098
Clinton	117	221	315
Cole	301	559	800
Cooper	123	235	337
Crawford	251	536	757
Dade	49	112	155
Dallas	118	234	338
Daviess	70	137	192
DeKalb	50	91	134
Dent	199	402	569
Douglas	116	238	337
Dunklin	1,010	2,219	3,077
Franklin	547	1,135	1,591
Gasconade	52	109	152
Gentry	49	86	122
Greene	2,276	4,355	6,280
Grundy	84	149	218
Harrison	84	145	212
Henry	193	418	573
Hickory	64	118	171
Holt	60	125	175
Howard	133	283	380
Howell	294	581	829
Iron	139	275	401
Jackson	12,259	25,743	35,779
Jasper	1,003	1,956	2,780
Jefferson	989	1,868	2,736
Johnson	225	422	616
Knox	25	46	67
Laclede	312	648	909
Lafayette	263	490	703
Lawrence	224	456	637
Lewis	91	179	253
Lincoln	124	249	357

Division of Family Services, by Program and by County, July 1977-June 1978

GR		BP	ABS	NC	SSI-SP	SP
Cases	Persons	Cases	Cases	Cases	Cases	Cases
4,734	4,989	263	868	8,429	29,192	9,840
7	7		2	51	135	19
11	11		5	44	73	19
1	1		1	24	39	13
19	21	7	6	73	146	40
11	12	3	5	92	283	67
2	3	3	4	1	98	15
10	11	2	4	47	127	41
9	10		1	16	72	18
11	11	1		27	187	38
22	23	3	10	43	258	95
112	119	9	28	131	419	185
89	95	2	13	31	706	167
4	4	2		26	89	21
7	8	4	2	46	137	30
14	16	6	3	29	130	22
41	43	2	6	81	303	117
15	18	1	6	25	84	21
16	18		1		120	24
6	6		5	58	98	29
15	16	1	3	4	133	21
23	27	1		75	106	29
8	11		2	31	179	20
5	6		4	1	63	8
50	55	2	4	132	251	95
9	9		3	103	73	25
18	19	4	4	45	166	61
3	4		1	63	109	31
25	25		2	19	188	66
3	3		3		98	12
14	14	1	1		179	30
10	11		3	10	89	19
1	1		2	1	46	19
19	22	1	2	24	209	30
6	8	1	1	1	186	33
69	72		7	13	937	186
18	18	7	15	59	213	77
6	7	2	4	32	69	14
1	1			19	90	14
129	137	11	28	380	882	295
7	8	1	2		102	20
9	11		2	2	135	13
24	25	2	3	66	156	44
3	3			1	84	10
5	9			35	85	16
8	8	1	2	66	131	29
11	12	4	12	25	419	68
10	11		3	8	146	30
549	573	45	138	1,126	2,105	848
69	74	18	32	278	687	243
26	29	5	24	267	248	133
9	9	3	7	111	87	30
1	1			6	46	10
32	34	1	3	21	301	56
11	11		5	91	130	37
19	22	1	7	23	269	73
6	8		5	72	50	18
5	5	1	1	87	93	32

Table I. Average Monthly Number of Recipients Under Programs Administered by the

County	AFDC		
	Families	Children	Persons
Linn	146	293	407
Livingston	126	234	337
McDonald	217	445	631
Macon	90	172	248
Madison	141	290	404
Maries	56	117	164
Marion	339	694	973
Mercer	24	48	68
Miller	166	316	450
Mississippi	683	1,584	2,178
Moniteau	69	143	198
Monroe	85	178	243
Montgomery	121	237	334
Morgan	114	217	314
New Madrid	864	1,905	2,647
Newton	317	623	888
Nodaway	113	199	289
Oregon	110	250	348
Osage	37	83	110
Ozark	91	171	252
Pemiscot	1,185	3,066	4,058
Perry	88	167	236
Pettis	427	813	1,136
Phelps	337	665	946
Pike	208	425	602
Platte	280	533	763
Polk	164	327	464
Pulaski	359	705	1,004
Putnam	23	49	68
Ralls	42	86	118
Randolph	285	570	802
Ray	164	303	437
Reynolds	85	179	248
Ripley	245	546	751
St. Charles	743	1,370	1,999
St. Clair	119	245	349
St. Francois	586	1,163	1,664
Ste. Genevieve	96	193	266
St. Louis	7,503	14,793	20,993
St. Louis City	23,348	53,145	73,236
Saline	230	448	636
Schuyler	29	57	83
Scotland	11	23	30
Scott	825	1,752	2,436
Shannon	110	229	311
Shelby	66	137	190
Stoddard	429	907	1,251
Stone	95	192	276
Sullivan	67	140	199
Taney	173	311	456
Texas	223	471	660
Vernon	239	490	676
Warren	116	227	326
Washington	397	860	1,220
Wayne	180	357	497
Webster	155	316	447
Worth	31	59	83
Wright	218	415	603

Division of Family Services, by Program and by County, July 1977-June 1978 -- Continued

GR		BP	ABS	NC	SSI-SP	SP
Cases	Persons	Cases	Cases	Cases	Cases	Cases
13	14	1	3	29	183	55
8	8	2	6	133	155	45
24	27		2	40	150	26
6	7		2	3	148	22
5	5		4	24	129	32
4	5	1	2	1	76	20
22	22	2	9	146	202	63
6	7				54	12
27	28		5	1	159	34
56	62	1	4		428	102
3	3	3	6	52	88	16
8	9	2	4	96	81	20
10	10		1	55	79	17
9	10	1	1	3	127	35
45	48		15	6	564	131
21	21	1	4	2	289	55
7	7	1		39	135	32
8	8		2		250	31
1	1		2	28	79	18
9	10	1	7		145	23
64	66	2	10	3	735	144
5	5	1	4	2	92	21
21	21	1	12	116	270	66
22	24	2	8	44	196	62
18	19		6	133	123	42
11	12			75	71	22
15	16		8	70	216	33
26	30		3	32	169	35
1	1		2	14	60	7
1	2		2	20	63	21
17	19		3	118	181	61
8	11		2	1	83	24
7	8				137	27
25	29		4		262	58
35	37	1	15	79	163	107
21	26	1			122	15
43	48	3	7	144	314	121
10	12	1	4	34	40	19
154	162	38	49	1,163	1,106	869
2,022	2,074	25	147	887	4,754	2,611
13	13	1	8	134	162	79
1	1		1	23	53	4
2	2			2	44	5
43	46		12	52	465	166
6	7		3		144	30
7	8			67	93	23
69	80		7	57	522	165
8	8		2	4	156	31
6	6	3	4	109	129	8
11	11	1	1	91	146	45
6	6		2	21	247	47
29	32	4	11	32	190	60
4	4			35	79	32
35	39	1	3	15	193	62
14	15		5	3	241	48
4	4	3	3	24	270	35
5	6			1	28	7
10	11	1	4	24	308	63

Table II. Cash Payments Extended to Recipients Under Programs Administered by the

County	Total All Programs	AFDC	GR
STATE TOTAL	180,348,406	140,276,364	3,861,274
Adair	455,682	289,420	5,514
Andrew	321,985	163,901	8,799
Atchison	184,962	110,612	630
Audrain	729,220	459,194	15,897
Barry	753,511	407,126	8,767
Barton	164,680	114,130	1,927
Bates	459,861	269,804	8,727
Benton	298,630	218,147	7,898
Bollinger	372,558	225,422	8,769
Boone	1,566,591	1,282,344	18,111
Buchanan	2,857,402	2,205,773	88,172
Butler	2,100,901	1,610,348	73,120
Caldwell	192,431	89,951	3,226
Callaway	614,170	428,751	5,871
Camden	430,748	281,461	12,232
Cape Girardeau	1,272,853	856,143	33,889
Carroll	345,180	235,086	12,729
Carter	231,716	164,503	11,872
Cass	706,097	502,274	4,900
Cedar	251,795	169,301	12,535
Chariton	399,039	181,600	18,632
Christian	446,194	301,086	8,093
Clark	144,393	110,094	4,966
Clay	1,891,249	1,365,079	40,762
Clinton	478,864	200,642	6,858
Cole	735,596	510,627	13,635
Cooper	418,397	214,873	2,926
Crawford	663,044	505,933	17,598
Dade	141,668	99,595	2,170
Dallas	313,731	220,004	10,335
Daviess	193,441	122,744	8,890
DeKalb	111,978	89,675	770
Dent	533,637	366,567	16,487
Douglas	299,280	215,776	6,012
Dunklin	2,461,438	1,979,014	53,421
Franklin	1,323,526	1,038,310	14,695
Gasconade	210,639	93,078	4,574
Gentry	154,512	74,182	412
Greene	5,664,595	4,193,557	103,442
Grundy	195,126	145,522	6,191
Harrison	197,596	137,045	7,791
Henry	612,660	362,011	19,781
Hickory	150,678	114,371	2,310
Holt	234,731	109,566	3,728
Howard	432,187	217,188	5,977
Howell	799,956	547,023	9,079
Iron	380,171	285,639	8,770
Jackson	27,872,999	23,291,819	455,983
Jasper	2,873,746	1,789,832	56,551
Jefferson	2,702,679	1,861,061	22,791
Johnson	727,707	403,140	5,804
Knox	80,463	44,669	1,050
Laclede	793,479	577,442	25,246
Lafayette	724,503	450,519	7,881
Lawrence	600,446	401,460	13,858
Lewis	363,554	161,451	5,374
Lincoln	494,944	235,976	4,112

Division of Family Services, by Program and by County, July 1977-June 1978

BP	ABS	NC	SSI-SP	SP
436,946	1,185,080	18,886,751	10,382,778	5.319.213
	3,240	99,039	47,302	11,167
135	5,911	105,646	30,903	6,690
	1,755	54,006	13,162	4,797
11,340	8,569	170,895	46,522	16,803
4,455	6,705	214,586	85,439	26,433
5,130	5,226	3,176	29,278	5,813
3,780	4,783	110,360	39,814	22,593
	2,314	36,603	21,392	12,276
1,620		62,691	58,076	15,980
4,860	15,807	98,728	99,481	47,260
13,905	37,848	260,014	161,022	90,668
2,700	18,900	71,464	239,661	84,708
4,020		60,286	26,350	8,598
6,210	1,288	102,221	50,854	18,975
9,720	4,661	66,920	42,739	13,015
3,915	6,569	188,842	120,471	63,024
1,620	7,321	57,849	24,522	6,053
	779		42,715	11,847
270	5,243	135,498	38,479	19,433
1,485	4,860	8,883	41,669	13,062
1,890	65	148,406	34,292	14,154
	3,165	69,499	53,109	11,242
	4,794	2,400	18,795	3,344
2,700	7,020	302,145	110,609	62,934
	5,364	233,541	22,586	9,873
6,075	5,023	100,708	66,752	32,776
	1,677	147,124	39,999	11,798
	2,705	40,955	64,926	30,927
	4,530	400	30,325	4,648
1,485	1,215		61,780	18,912
	4,320	22,788	24,730	9,969
	2,700	1,400	13,145	4,288
2,160	3,375	55,636	75,117	14,295
1,620	887	2,844	55,483	16,658
	9,338	30,365	314,980	74,320
11,745	19,906	130,188	70,639	38,043
2,430	4,121	73,706	26,038	6,692
		43,843	26,239	9,836
19,210	41,270	853,384	303,391	150,341
1,620	2,139		33,039	6,615
	3,240	4,608	38,594	6,318
2,565	4,558	155,077	46,207	22,461
		2,400	26,192	5,405
	585	83,385	28,878	8,589
945	2,150	137,362	51,286	17,279
5,805	12,140	40,945	150,470	34,494
405	3,742	19,193	48,523	13,899
74,675	189,984	2,556,660	830,538	473,340
30,805	43,592	619,288	226,892	106,786
8,765	33,234	605,502	92,239	79,087
5,640	9,074	255,215	32,698	16,136
540		12,970	15,516	5,718
1,620	4,609	47,615	108,000	28,947
	8,054	199,978	43,883	14,188
1,890	7,355	52,728	93,782	29,373
270	6,107	166,673	17,395	6,284
945	1,729	203,929	31,231	17,022

Table II. Cash Payments Extended to Recipients Under Programs Administered by the

County	Total All Programs	AFDC	GR
Linn	426,243	253,248	11,818
Livingston	629,662	215,833	5,912
McDonald	587,051	412,695	21,643
Macon	229,863	153,080	5,145
Madison	380,412	256,060	3,646
Maries	147,946	104,452	3,990
Marion	1,098,240	631,950	17,753
Mercer	69,345	42,903	5,042
Miller	379,570	280,686	20,908
Mississippi	1,632,902	1,391,113	42,963
Moniteau	295,246	123,086	2,306
Monroe	428,699	149,317	7,840
Montgomery	358,912	205,601	8,427
Morgan	282,887	206,779	8,726
New Madrid	2,025,068	1,702,377	35,998
Newton	724,065	584,489	16,580
Nodaway	339,634	182,886	5,710
Oregon	325,662	231,660	5,952
Osage	167,321	67,094	980
Ozark	252,319	176,359	8,269
Pemiscot	2,868,236	2,498,504	49,991
Perry	204,525	148,198	4,280
Pettis	1,146,864	724,472	17,151
Phelps	842,427	610,932	18,823
Pike	792,999	394,016	15,530
Platte	730,379	496,679	9,938
Polk	558,616	295,726	11,141
Pulaski	836,432	659,158	21,923
Putnam	98,132	40,429	840
Ralls	156,056	71,023	1,145
Randolph	917,589	523,918	13,758
Ray	327,205	279,048	5,840
Reynolds	219,325	157,335	6,236
Ripley	632,838	483,813	21,816
St. Charles	1,729,562	1,348,620	28,848
St. Clair	295,718	230,165	15,433
St. Francois	1,651,954	1,122,053	34,282
Ste. Genevieve	283,091	165,423	8,817
St. Louis	17,903,083	13,895,135	127,248
St. Louis City	56,034,465	48,955,480	1,652,961
Saline	822,309	403,654	9,801
Schuyler	129,834	55,886	840
Scotland	37,330	15,612	1,540
Scott	1,990,765	1,554,063	32,270
Shannon	254,464	185,214	4,461
Shelby	307,626	115,354	4,803
Stoddard	1,222,944	778,853	53,705
Stone	264,721	182,872	6,480
Sullivan	446,707	127,036	4,571
Taney	604,123	309,904	9,258
Texas	565,695	427,967	4,676
Vernon	631,825	424,844	24,516
Warren	373,174	224,924	3,182
Washington	1,002,891	848,962	27,135
Wayne	453,893	316,053	12,164
Webster	439,334	287,373	3,283
Worth	63,447	49,600	4,236
Wright	592,962	394,537	8,204

Division of Family Services, by Program and by County, July 1977-June 1978--Continued

BP	ABS	NC	SSI-SP	SP
1,620	4,518	67,163	58,448	29,428
3,645	8,587	314,199	56,048	25,438
	1,726	95,437	43,334	12,216
405	1,802	6,204	52,003	11,224
	6,014	55,998	45,122	13,572
1,620	2,265	2,014	25,918	7,687
3,640	12,999	308,756	80,057	43,085
		400	17,553	3,447
675	5,887	1,770	52,568	17,076
1,755	4,170		149,525	43,376
4,850	9,274	120,467	27,934	7,329
4,235	5,102	226,297	26,524	9,384
	2,038	104,538	30,072	8,236
1,620	1,632	6,896	41,918	15,316
	19,836	11,695	186,222	68,940
1,620	5,349	3,780	87,731	24,516
1,890	540	86,984	46,696	14,928
	2,367		74,132	11,551
	2,370	63,143	27,249	6,485
1,620	7,008		47,271	11,792
3,240	11,386	4,564	236,414	64,137
1,350	6,345	3,940	30,636	9,776
1,620	17,975	265,377	85,838	34,431
3,645	11,386	76,673	86,004	34,964
	9,042	313,613	45,561	15,237
		179,411	30,340	14,011
	10,767	156,681	70,216	14,085
	3,357	75,142	58,072	18,780
	2,554	31,962	18,024	4,323
	1,853	45,973	28,643	7,419
	4,605	276,283	62,948	36,077
	2,575	2,400	25,709	11,633
			46,675	9,079
270	5,148		88,772	33,019
810	21,938	180,896	70,339	78,111
1,620			40,601	7,899
4,050	10,221	310,632	103,151	67,565
1,215	6,075	78,084	13,021	10,456
62,601	67,684	2,682,902	468,594	598,919
41,220	204,244	1,819,147	1,847,221	1,514,192
945	11,289	309,288	51,283	36,049
	2,245	55,493	14,158	1,212
		4,800	13,097	2,281
405	15,283	123,677	181,414	83,653
	3,441	200	47,569	13,579
600	270	143,422	32,275	10,902
540	10,150	132,409	172,974	74,313
	3,240	9,925	46,957	15,247
4,590	6,990	259,562	38,422	5,536
1,620	1,765	210,740	49,625	21,211
	2,840	35,206	72,755	22,251
6,750	14,608	69,507	63,006	28,594
		81,687	40,541	22,840
1,890	3,764	34,244	60,463	26,433
540	5,547	7,522	84,708	27,359
4,860	3,762	42,933	83,831	13,292
		1,430	6,324	1,857
2,400	3,701	54,718	102,123	27,279

Table III. Amount of Cash and Vendor Payments Expended Under Programs

County	Total All Programs		
	Total	Cash	Vendor
STATE TOTAL	384,622,570*	180,348,406	204,274,164*
Adair	1,367,710	455,682	912,028
Andrew	768,793	321,985	446,808
Atchison	609,210	184,962	424,248
Audrain	1,755,028	729,220	1,025,808
Barry	1,399,203	753,511	645,692
Barton	649,213	164,680	484,533
Bates	1,374,025	459,861	914,164
Benton	768,384	298,630	469,754
Bollinger	711,193	372,558	338,635
Boone	3,675,560	1,566,591	2,108,969
Buchanan	6,754,535	2,857,402	3,897,133
Butler	4,928,601	2,100,901	2,827,700
Caldwell	428,794	192,431	236,363
Callaway	1,203,479	614,170	589,309
Camden	908,780	430,748	478,032
Cape Girardeau	2,559,441	1,272,853	1,286,588
Carroll	566,822	345,180	221,642
Carter	734,857	231,716	503,141
Cass	1,269,133	706,097	563,036
Cedar	1,013,541	251,795	761,746
Chariton	687,401	399,039	288,362
Christian	726,583	446,194	280,389
Clark	432,991	144,393	288,598
Clay	3,441,191	1,891,249	1,549,942
Clinton	748,266	478,864	269,402
Cole	1,614,286	735,596	878,690
Cooper	735,134	418,397	316,737
Crawford	1,220,516	663,044	557,472
Dade	517,681	141,668	376,013
Dallas	1,109,181	313,731	795,450
Daviess	487,787	193,441	294,346
DeKalb	445,189	111,978	333,211
Dent	1,551,442	533,637	1,017,805
Douglas	1,058,397	299,280	759,117
Dunklin	6,123,456	2,461,438	3,662,018
Franklin	3,080,064	1,323,526	1,756,538
Gasconade	452,852	210,639	242,213
Gentry	521,461	154,512	366,949
Greene	11,161,174	5,664,595	5,496,579
Grundy	795,581	195,126	600,455
Harrison	571,736	197,596	374,140
Henry	1,740,807	612,660	1,128,147
Hickory	290,949	150,678	140,271
Holt	541,454	234,731	306,723
Howard	914,637	432,187	482,450
Howell	1,819,341	799,956	1,019,385
Iron	1,281,488	380,171	901,317
Jackson	52,040,145	27,872,999	24,167,146
Jasper	5,776,504	2,873,746	2,902,758
Jefferson	4,071,736	2,702,679	1,369,057
Johnson	1,056,803	727,707	329,096
Knox	278,141	80,463	197,678
Laclede	1,939,842	793,479	1,146,363
Lafayette	1,888,264	724,503	1,163,761
Lawrence	1,509,446	600,446	909,000
Lewis	503,370	363,554	139,816
Lincoln	1,246,911	494,944	751,967

* State Totals include payments for Buy In, Mental and TB Hospitals and ICF-MR.

Administered by the Division of Family Services, July 1977-June 1978

County	Total All Programs		
	Total	Cash	Vendor
Linn	1,313,772	426,243	887,529
Livingston	1,029,338	629,662	399,676
McDonald	1,020,637	587,051	433,586
Macon	936,360	229,863	706,497
Madison	846,737	380,412	466,325
Maries	268,408	147,946	120,462
Marion	1,796,292	1,098,240	698,052
Mercer	359,020	69,345	289,675
Miller	940,274	379,570	560,704
Mississippi	3,642,868	1,632,902	2,009,966
Moniteau	757,591	295,246	462,345
Monroe	607,216	428,699	178,517
Montgomery	772,652	358,912	413,740
Morgan	1,002,279	282,887	719,392
New Madrid	4,165,172	2,025,068	2,140,104
Newton	1,549,791	724,065	825,726
Nodaway	969,962	339,634	630,328
Oregon	1,146,506	325,662	820,844
Osage	286,821	167,321	119,500
Ozark	471,478	252,319	219,159
Pemiscot	5,631,578	2,868,236	2,763,342
Perry	1,162,080	204,525	957,555
Pettis	2,456,184	1,146,864	1,309,320
Phelps	1,486,801	842,427	644,374
Pike	1,229,356	792,999	436,357
Platte	1,083,335	730,379	352,956
Polk	1,377,572	558,616	818,956
Pulaski	1,480,662	836,432	644,230
Putnam	227,944	98,132	129,812
Ralls	248,275	156,056	92,219
Randolph	1,434,164	917,589	516,575
Ray	805,124	327,205	477,919
Reynolds	441,334	219,325	222,009
Ripley	1,698,934	632,838	1,066,096
St. Charles	4,155,405	1,729,562	2,425,843
St. Clair	1,018,263	295,718	722,545
St. Francois	3,387,171	1,651,954	1,735,217
Ste. Genevieve	714,616	283,091	431,525
St. Louis	32,088,591	17,903,083	14,185,508
St. Louis City	97,821,255	56,034,465	41,786,790
Saline	1,314,579	822,309	492,270
Schuyler	456,535	129,834	326,701
Scotland	263,148	37,330	225,818
Scott	3,738,037	1,990,765	1,747,272
Shannon	962,792	254,464	708,328
Shelby	578,220	307,626	270,594
Stoddard	3,159,686	1,222,944	1,936,742
Stone	513,335	264,721	248,614
Sullivan	719,946	446,707	273,239
Taney	982,778	604,123	378,655
Texas	1,544,537	565,695	978,842
Vernon	1,716,135	631,825	1,084,310
Warren	543,093	373,174	169,919
Washington	1,769,091	1,002,891	766,200
Wayne	1,452,912	453,893	999,019
Webster	1,079,211	439,334	639,877
Worth	234,867	63,447	171,420
Wright	1,298,584	592,962	705,622

Table IV. Medical Assistance Cases and Payments,

County	Total		Physicians' Services		Drugs	
	Unduplicated Cases	Payments	Cases	Payments	Cases	Payments
STATE TOTAL	401,882	173,639,407*	295,669	21,336,652	273,377	20,418,377
Adair	1,239	912,028	877	80,433	753	74,345
Andrew	698	446,808	546	29,610	505	43,480
Atchison	559	424,248	422	26,228	347	33,740
Audrain	1,690	1,025,808	1,383	111,476	1,219	101,562
Barry	1,938	645,692	1,622	114,175	1,480	145,454
Barton	673	484,533	523	34,690	488	53,986
Bates	1,342	914,164	1,055	87,325	938	94,133
Benton	924	469,754	790	50,984	637	54,163
Bollinger	1,172	338,635	924	61,802	945	110,469
Boone	4,449	2,108,969	3,739	295,908	2,291	147,585
Buchanan	7,826	3,897,133	6,315	502,250	5,285	368,308
Butler	6,225	2,827,700	5,424	495,338	4,952	568,279
Caldwell	497	236,363	406	22,609	366	44,705
Callaway	1,868	589,309	1,595	107,404	1,122	65,900
Camden	1,225	478,032	1,075	80,791	951	89,262
Cape Girardeau	3,165	1,286,588	2,471	194,564	2,338	203,822
Carroll	909	221,642	747	44,463	606	43,141
Carter	795	503,141	677	60,894	638	77,524
Cass	1,772	563,036	1,377	99,991	1,101	71,653
Cedar	1,115	761,746	915	53,167	827	94,318
Chariton	924	288,362	726	47,284	711	62,751
Christian	1,325	280,389	1,056	72,027	924	65,572
Clark	544	288,598	447	30,291	390	41,554
Clay	4,752	1,549,942	3,507	238,863	2,971	213,628
Clinton	919	269,402	717	43,490	643	67,442
Cole	2,234	878,690	1,807	139,261	1,578	106,335
Cooper	976	316,737	832	66,550	709	81,359
Crawford	2,022	557,472	1,718	108,494	1,528	128,727
Dade	502	376,013	348	24,063	366	48,576
Dallas	1,200	795,450	1,032	84,430	936	135,430
Daviess	592	294,346	489	31,292	405	39,704
DeKalb	415	333,211	322	23,118	272	28,209
Dent	1,687	1,017,805	1,462	100,964	1,298	127,461
Douglas	1,225	759,117	1,038	76,245	940	100,456
Dunklin	7,567	3,662,018	6,502	467,596	6,167	737,865
Franklin	3,597	1,756,538	2,946	193,375	2,444	180,975
Gasconade	576	242,213	468	27,943	415	39,913
Gentry	528	366,949	448	26,825	355	33,591
Greene	13,518	5,496,579	10,895	920,461	9,224	716,504
Grundy	819	600,455	601	36,973	585	61,067
Harrison	668	374,140	527	29,670	456	39,338
Henry	1,739	1,128,147	1,438	104,890	1,294	126,423
Hickory	505	140,271	416	33,111	358	34,699
Holt	584	306,723	473	30,628	431	30,485
Howard	1,071	482,450	917	78,503	821	74,476
Howell	2,429	1,019,385	2,050	146,901	1,848	203,237
Iron	1,258	901,317	1,085	85,816	981	113,932
Jackson	56,346	24,167,146	38,587	3,010,221	34,964	1,935,260
Jasper	7,232	2,902,758	5,694	481,501	5,134	461,700
Jefferson	5,389	1,369,057	4,153	254,933	3,600	212,211
Johnson	1,322	329,096	986	62,971	860	68,733
Knox	321	197,678	269	18,400	217	25,062
Laclede	2,447	1,146,363	2,086	155,074	1,761	155,323
Lafayette	1,820	1,163,761	1,421	94,462	1,305	117,818
Lawrence	2,041	909,000	1,652	129,133	1,414	125,322
Lewis	603	139,816	437	31,337	396	33,986
Lincoln	1,112	751,967	839	55,904	836	73,490

* Total does not include $4,226,946 to Mental Hospitals, $38,237 to TB Hospital, $19,943,101 for ICF-Mentally Retarded and $6,426,421 for Buy In.

by Type of Service and by County, July 1977-June 1978

Dental Services		Inpatient Hospital		Outpatient Hospital		Skilled and Intermediate Care Facilities	
Cases	Payments	Cases	Payments	Cases	Payments	Cases	Payments
81,757	5,545,254	80,171	63,184,893	178,916	7,485,348	15,474	55,668,883
272	21,348	306	272,081	679	40,474	112	423,347
122	9,092	97	57,937	132	3,788	93	302,901
129	7,538	112	57,676	122	4,344	87	294,722
269	15,064	416	245,913	677	18,625	110	533,168
359	27,344	464	198,977	403	13,061	44	146,681
90	4,949	141	42,154	214	8,039	110	340,715
189	12,265	378	273,986	572	19,085	127	427,370
138	8,006	162	75,006	233	7,906	77	273,689
268	20,680	234	129,946	347	9,964	5	5,774
883	56,671	836	592,281	2,237	80,009	231	936,515
1,828	134,622	1,757	1,300,441	2,885	109,053	447	1,482,459
1,055	59,419	1,729	1,108,163	2,462	79,830	136	516,671
111	9,732	84	41,819	115	4,413	30	113,085
349	20,848	341	186,223	791	23,929	78	185,005
211	16,042	172	111,869	255	9,011	53	171,057
611	39,503	603	462,308	917	33,816	104	352,575
236	18,503	206	107,855	275	7,680		
147	7,639	197	97,205	265	8,156	76	251,723
373	30,435	300	293,615	567	22,088	35	45,254
224	14,419	216	83,183	382	10,193	171	506,466
117	7,443	157	89,751	209	6,460	60	74,673
359	28,592	210	101,413	299	9,528	9	3,257
89	3,456	112	84,830	152	5,598	38	122,869
1,205	91,839	710	606,382	1,513	54,413	121	344,817
238	17,742	146	125,619	202	8,807	3	6,302
507	32,012	483	345,325	944	36,615	71	219,142
193	11,491	217	143,831	363	11,843	5	1,663
314	14,567	401	188,844	604	21,359	51	95,481
90	5,122	83	45,408	119	5,875	83	246,969
208	13,809	215	98,191	306	9,677	120	453,913
88	6,041	93	69,908	99	2,822	59	144,579
76	5,649	88	45,154	84	2,802	78	228,279
260	15,543	411	223,226	702	23,234	132	527,377
184	12,346	250	139,899	313	11,658	133	418,513
1,398	90,135	1,856	920,598	3,011	93,389	345	1,352,435
569	31,790	674	488,750	1,257	56,453	240	805,195
45	2,799	106	65,441	190	6,629	42	99,488
93	10,626	86	40,140	114	3,270	74	252,497
4,037	364,050	2,509	1,715,120	4,268	160,291	502	1,620,153
120	6,261	192	112,426	270	5,925	120	377,803
132	11,622	125	69,082	205	5,269	79	219,159
331	25,061	370	183,580	671	21,123	180	667,070
104	7,252	107	61,286	136	3,923		
75	5,563	105	67,536	69	1,712	55	170,799
205	16,028	260	150,458	369	11,254	40	151,731
436	22,013	549	270,867	824	27,695	93	348,672
163	8,455	287	189,048	55[illegible]	21,703	128	482,363
14,638	972,496	9,812	10,739,119	27,884	1,218,866	1,464	6,291,184
1,751	151,105	1,529	994,577	2,796	129,272	205	684,603
1,142	79,956	982	745,596	1,966	72,138	6	4,223
251	20,080	214	155,160	479	18,639	14	3,513
57	3,726	47	16,502	88	2,868	35	131,120
485	34,751	570	295,236	795	23,415	130	482,564
294	22,624	310	178,689	581	17,077	197	733,091
454	30,045	471	249,076	426	11,774	132	363,650
57	3,912	108	63,666	207	6,572	1	343
131	5,893	250	138,412	414	12,608	130	465,660

Table IV. Medical Assistance Cases and Payments

County	Total		Physicians' Services		Drugs	
	Unduplicated Cases	Payments	Cases	Payments	Cases	Payments
Linn	1,474	887,529	1,209	81,025	1,100	115,587
Livingston	1,294	399,676	1,029	52,877	912	96,219
McDonald	1,626	433,586	1,346	99,091	1,228	99,640
Macon	962	706,497	780	62,049	685	71,818
Madison	1,091	466,325	976	87,619	822	73,935
Maries	483	120,462	398	25,834	369	32,035
Marion	2,308	698,052	1,815	117,335	1,423	102,694
Mercer	302	289,675	230	16,703	233	26,879
Miller	1,363	560,704	1,224	87,631	1,054	85,959
Mississippi	4,628	2,009,966	4,183	303,906	3,791	436,151
Moniteau	729	462,345	646	55,040	596	64,019
Monroe	798	178,517	693	46,654	589	56,382
Montgomery	946	413,740	812	60,667	758	69,947
Morgan	1,058	719,392	959	71,648	851	82,869
New Madrid	5,432	2,140,104	4,786	344,604	4,408	416,965
Newton	2,290	825,726	1,748	139,569	1,656	118,514
Nodaway	972	630,328	735	52,119	707	70,097
Oregon	1,337	820,844	1,147	70,748	1,147	136,137
Osage	442	119,500	338	28,480	310	31,572
Ozark	825	219,159	614	45,009	616	61,551
Pemiscot	7,401	2,763,342	6,524	487,291	5,998	523,935
Perry	892	957,555	701	54,256	635	65,059
Pettis	3,106	1,309,320	2,512	175,877	2,078	147,313
Phelps	2,212	644,374	1,786	131,161	1,621	112,797
Pike	1,492	436,357	1,258	87,183	1,054	88,616
Platte	1,569	352,956	1,068	66,607	894	62,183
Polk	1,681	818,956	1,452	115,967	1,255	127,066
Pulaski	1,820	644,230	1,585	127,642	1,447	97,487
Putnam	301	129,812	245	26,259	236	27,969
Ralls	391	92,219	295	19,510	229	18,043
Randolph	2,039	516,575	1,778	124,760	1,468	108,841
Ray	1,039	477,919	800	47,096	710	55,082
Reynolds	765	222,009	686	44,499	629	59,768
Ripley	2,178	1,066,096	1,900	143,603	1,708	187,872
St. Charles	4,169	2,425,843	3,384	260,713	2,721	158,580
St. Clair	1,091	722,545	907	76,813	813	73,316
St. Francois	4,249	1,735,217	3,605	264,413	3,174	310,994
Ste. Genevieve	778	431,525	659	42,709	545	46,537
St. Louis	34,462	14,185,508	22,526	1,437,583	21,213	1,183,449
St. Louis City	97,898	41,786,790	58,507	3,806,065	62,273	3,188,791
Saline	1,778	492,270	1,385	104,740	1,235	113,447
Schuyler	370	326,701	310	28,107	294	31,226
Scotland	222	225,818	187	13,452	147	19,456
Scott	5,271	1,747,272	4,454	337,521	4,003	350,414
Shannon	1,054	708,328	888	62,288	873	84,752
Shelby	599	270,594	474	31,769	453	43,028
Stoddard	4,017	1,936,742	3,595	274,845	3,323	403,982
Stone	906	248,614	735	55,130	610	55,446
Sullivan	807	273,239	701	59,631	615	66,908
Taney	1,289	378,655	1,042	79,934	958	80,154
Texas	1,919	978,842	1,648	116,070	1,498	139,025
Vernon	2,205	1,084,310	1,748	118,713	1,544	149,057
Warren	704	169,919	508	35,963	466	32,709
Washington	2,708	766,200	2,296	154,438	2,032	154,982
Wayne	1,610	999,019	1,425	123,952	1,320	175,919
Webster	1,533	639,877	1,326	90,129	1,098	122,118
Worth	262	171,420	233	17,422	188	20,126
Wright	1,845	705,622	1,594	126,831	1,428	148,517

by Type of Service and by County, July 1977-June 1978--Continued

Dental Services		Inpatient Hospital		Outpatient Hospital		Skilled and Intermediate Care Facilities	
Cases	Payments	Cases	Payments	Cases	Payments	Cases	Payments
219	15,516	367	163,945	572	17,360	148	494,096
285	11,229	238	100,083	471	11,463	39	127,805
276	26,100	366	197,484	450	11,271		
139	7,455	238	129,601	368	12,387	146	423,187
188	11,530	304	262,302	523	17,931	5	13,008
75	3,728	113	53,701	157	5,164		
429	31,268	553	403,009	891	25,509	16	18,237
50	3,060	67	30,277	104	2,322	45	210,434
209	12,369	234	131,993	275	10,808	72	231,944
1,152	109,063	758	414,268	1,340	41,024	179	705,554
105	5,395	157	85,431	202	6,590	55	245,870
87	5,128	139	65,377	168	4,510	1	466
105	6,197	201	121,350	256	8,361	48	147,218
133	6,391	172	92,757	170	7,081	139	458,646
1,011	59,332	1,070	566,447	1,845	55,136	168	697,620
418	32,840	449	265,347	547	33,615	87	235,841
213	12,705	261	183,130	353	10,122	100	302,155
186	13,912	233	89,748	299	10,308	139	499,991
77	4,284	83	48,648	156	6,516		
125	9,002	182	74,158	193	7,452	12	21,987
1,276	84,443	1,889	977,244	3,031	95,208	161	595,221
201	12,116	216	95,369	439	15,938	180	714,817
662	61,133	629	372,848	1,236	44,591	148	507,558
541	32,845	497	287,553	898	28,026	36	51,992
108	8,444	288	226,373	461	15,864	14	9,877
415	33,852	193	166,012	493	24,022	2	280
351	29,899	300	173,078	340	11,225	113	361,721
375	31,755	506	360,194	635	26,563	1	589
31	604	95	70,266	98	4,714		
77	5,409	85	46,350	122	2,907		
268	15,327	402	240,798	861	26,665	2	184
267	17,875	161	115,531	367	11,396	69	230,939
116	6,064	182	97,593	253	12,804	3	1,281
408	25,784	475	2[illegible],171	840	23,525	109	428,141
781	[illegible],963	767	646,414	1,647	73,690	281	1,222,483
174	[illegible]650	294	182,967	427	14,997	117	360,802
718	[illegible]501	1,055	602,918	1,608	48,545	153	453,846
162	[illegible]357	157	99,902	283	8,421	81	222,599
7,101	5[illegible],901	5,757	5,492,738	16,771	753,799	1,367	4,798,038
18,183	1,086,366	19,977	19,839,138	60,812	2,932,805	2,718	10,933,025
332	22,145	375	238,313	528	13,625		
53	2,847	95	64,372	108	5,826	62	194,323
30	1,690	59	34,927	101	4,856	42	151,437
1,048	57,475	1,046	531,613	2,086	67,842	107	402,407
170	8,920	212	94,541	276	11,983	111	445,844
54	1,873	136	58,649	156	5,661	49	129,614
621	33,462	824	442,627	1,070	31,787	242	750,039
193	13,693	179	109,744	244	13,649	1	952
114	4,723	272	123,668	380	17,622	2	687
329	26,839	270	176,103	441	15,571	1	54
331	19,720	399	187,651	664	23,306	127	493,070
390	24,355	505	247,882	965	27,219	184	517,084
134	5,824	150	88,681	233	6,465	2	277
583	35,061	624	370,448	1,405	51,271		
276	15,002	340	224,032	439	16,001	105	444,113
262	18,774	245	128,080	275	11,908	67	268,868
46	4,570	51	39,877	47	1,189	34	88,236
334	19,875	433	237,388	522	22,912	83	150,099

Table V. Number of Recipients Under Programs Administered

Month and Year	Total - All Types of Assistance		AFDC		
	Cases	Persons	Families	Children	Persons
1977-1978					
June	119,513	254,614	68,928	143,081	203,803
May	120,659	257,724	69,820	145,332	206,648
April	120,614	257,749	69,565	145,601	206,473
March	122,904	262,882	70,961	148,760	210,709
February	122,458	261,390	70,298	148,030	209,014
January	123,737	263,725	70,921	149,576	210,681
December	126,080	268,818	72,575	153,371	215,066
November	126,211	268,484	72,491	153,987	214,532
October	128,726	273,131	74,033	157,469	218,163
September	130,779	27.,070	75,500	160,773	221,487
August	131,461	277,055	75,785	162,405	221,066
July	135,405	284,263	78,142	167,437	226,674
1976-1977					
June	145,518	317,107	87,304	185,638	258,539
May	147,850	323,800	88,554	188,280	264,128
April	148,784	326,820	88,883	189,435	266,522
March	150,545	330,784	89,683	191,607	269,488
February	150,303	329,739	89,065	190,885	268,098
January	151,003	331,056	89,071	191,546	268,659
December	151,734	332,486	89,276	192,441	269,611
November	151,895	332,612	88,809	192,379	269,058
October	152,373	333,315	88,613	192,624	269,052
September	152,220	332,728	87,811	191,824	267,793
August	152,664	333,084	87,573	191,966	267,553
July	153,225	334,827	87,567	192,945	268,663

1/ For monthly data prior to 1976, see the Annual Report of the Division of Family Services. (Data subject to adjustment.)

by the Division of Family Services, July 1976-June 1978 1/

GR		BP	NC	ABS	SSI-SP	SP
Cases	Persons					
4,465	4,691	270	8,344	804	27,535	9,167
4,439	4,676	270	8,362	805	27,703	9,260
4,384	4,611	262	8,306	796	27,934	9,367
4,608	4,838	270	8,456	805	28,319	9,485
4,497	4,713	268	8,366	807	28,617	9,605
4,590	4,818	268	8,395	810	28,986	9,767
4,745	4,992	266	8,446	828	29,312	9,908
4,619	4,851	261	8,293	947	29,640	9,960
4,945	5,220	264	8,352	953	30,050	10,129
5,029	5,333	262	8,412	954	30,368	10,254
5,005	5,318	260	8,377	936	30,707	10,391
5,425	5,751	260	8,977	955	31,042	10,604
6,457	6,811	249	8,393	940	31,448	10,727
6,798	7,174	250	8,477	962	32,123	10,686
6,898	7,295	245	8,426	995	32,510	10,827
6,992	7,426	237	8,630	1,003	32,930	11,070
6,920	7,323	234	8,592	1,002	33,303	11,187
6,973	7,438	236	8,611	1,018	33,758	11,336
6,923	7,340	234	8,645	1,010	34,149	11,497
7,072	7,540	230	8,599	1,003	34,569	11,613
7,162	7,665	233	8,555	1,003	35,070	11,737
7,089	7,615	222	8,627	1,017	35,589	11,865
7,250	7,690	205	8,564	1,030	35,973	12,069
7,494	8,000	206	8,455	1,063	36,312	12,128

Table VI. Amount of Cash Expended Under Programs Administered (Exclusive of Vendor

Month and Year	Total	AFDC	GR
TOTAL (1977-1978)	180,348,406	140,276,364	3,861,274
June	14,798,244	11,566,313	303,113
May	14,940,541	11,693,004	301,760
April	14,883,793	11,643,663	297,381
March	15,155,019	11,854,380	313,356
February	14,989,319	11,701,429	305,991
January	15,038,572	11,725,140	311,896
December	15,207,126	11,857,730	322,384
November	15,014,604	11,689,255	313,483
October	15,124,843	11,745,607	337,848
September	15,188,543	11,778,016	343,613
August	14,858,596	11,449,975	340,624
July	15,149,206	11,571,852	369,825
TOTAL (1976-1977)	182,867,382	138,122,582	5,750,299
June	14,731,554	11,174,450	439,856
May	15,019,016	11,398,537	463,436
April	15,138,367	11,500,364	471,969
March	15,326,573	11,622,923	478,814
February	15,260,506	11,555,740	472,869
January	15,311,829	11,575,647	478,760
December	15,361,444	11,606,708	473,931
November	15,351,723	11,576,022	484,948
October	15,363,949	11,569,577	492,799
September	15,307,433	11,494,388	485,017
August	15,311,065	11,497,613	495,662
July	15,383,923	11,550,613	512,238

1/ For monthly data prior to 1976, see the Annual Report of the Division of Family Services. (Data rounded to nearest dollar and subject to adjustment.)

by the Division of Family Services, July 1976-June 1978 [1]
Medical Care)

BP	NC	ABS	SSI-SP	SP
436,946	18,886,751	1,185,080	10,382,778	5,319,213
36,920	1,567,658	91,267	815,543	417,430
36,985	1,573,218	90,986	822,442	422,146
35,840	1,562,080	89,617	828,815	426,397
36,938	1,588,686	90,583	839,751	431,325
36,733	1,568,822	90,869	848,621	436,854
36,798	1,570,766	91,203	858,980	443,789
36,528	1,577,701	94,055	868,725	450,003
35,918	1,545,042	107,775	877,084	446,047
36,388	1,553,819	109,255	889,687	452,239
36,118	1,563,449	109,539	900,488	457,320
35,890	1,550,103	108,391	910,860	462,753
35,890	1,665,407	111,540	921,782	472,910
381,597	18,927,290	1,390,151	12,185,667	6,109,796
34,340	1,562,969	110,202	931,915	477,822
34,572	1,577,382	112,785	956,140	476,164
33,962	1,564,473	117,297	968,525	481,777
32,882	1,595,488	118,842	982,009	495,615
32,527	1,586,668	118,308	992,723	501,671
32,927	1,589,445	120,189	1,005,645	509,216
32,707	1,593,608	119,521	1,018,611	516,358
32,102	1,584,756	118,624	1,032,886	522,385
32,507	1,569,844	118,100	1,054,135	526,987
31,022	1,573,088	117,678	1,087,564	518,676
25,972	1,572,381	107,292	1,072,550	539,595
26,077	1,557,188	111,313	1,082,964	543,530

Table VII. Amount of Medical Assistance Expended Under Programs Administered

Month and Year	Total All Services	Physicians' Services	Drugs	Skilled Nursing Care	Intermediate Care Facility
TOTAL (1977-1978)	173,639,458	21,152,249	20,418,549	1,896,300	53,772,573
June	15,255,320	1,507,060	1,696,331	125,140	5,062,241
May	15,952,719	1,930,213	1,833,588	125,782	4,992,614
April	16,729,743	1,955,041	1,725,768	137,123	5,089,106
March	14,179,683	1,805,934	1,828,498	145,354	4,484,849
February	13,982,476	1,589,403	1,701,202	139,196	4,664,660
January	14,027,669	1,728,745	1,796,841	129,738	4,500,744
December	13,572,470	1,444,454	1,577,786	136,178	4,312,422
November	14,644,024	2,084,239	1,773,875	173,035	4,459,296
October	13,586,645	1,927,526	1,625,754	158,062	4,133,902
September	14,249,447	1,618,609	1,492,800	233,822	4,619,185
August	15,567,958	1,982,288	1,846,600	215,148	4,769,847
July	11,891,304	1,578,737	1,519,506	177,722	2,683,707
TOTAL (1976-1977)	147,022,009	20,419,561	17,657,030	4,690,114	37,759,043
June	13,728,264	1,566,719	1,174,975	258,711	3,963,654
May	14,822,018	2,156,669	1,600,223	259,694	3,671,604
April	13,553,234	2,043,194	1,595,136	319,694	3,591,042
March	12,791,024	1,749,814	1,662,338	332,263	3,492,064
February	11,349,245	1,623,312	1,448,066	425,963	3,542,190
January	12,403,073	1,679,613	1,540,513	404,626	3,226,165
December	10,256,645	1,466,954	1,325,639	396,590	3,003,687
November	12,207,619	1,561,462	1,480,421	454,830	3,091,305
October	12,303,861	1,517,727	1,440,097	473,042	2,799,469
September	10,959,307	1,663,303	1,456,924	485,909	2,658,445
August	10,989,911	1,616,631	1,417,762	428,682	2,369,715
July	11,657,808	1,774,163	1,514,936	450,110	2,349,703

1/ For monthly data prior to 1976, see the Annual Report of the Division of Family Services. (Data rounded to nearest dollar and subject to adjustment. Totals do not include payments for Buy In, Mental and TB Hospitals and Intermediate Care Facilities - Mentally Retarded.)

by the Division of Family Services, by Type of Service and by Month, July 1976-June 1978 1/

Inpatient Hospital	Outpatient Hospital	Dental Services	X-ray and Laboratory	Ambulance Services	Home Health Services	Optometric Services
63,185,026	6,294,711	5,545,122	184,329	289,967	301,441	599,191
5,690,407	584,856	438,980	22,618	29,811	42,681	55,195
5,977,687	525,627	429,864	26,708	31,156	23,964	55,516
6,618,455	562,279	503,976	20,360	31,832	24,985	60,818
4,901,392	533,348	366,432	13,371	25,652	31,538	43,315
4,903,040	528,309	359,893	12,539	25,186	17,697	41,351
4,879,187	472,993	404,074	14,450	22,696	28,392	49,809
5,086,577	488,268	451,836	8,681	17,045	14,934	34,289
5,039,541	516,250	481,809	11,993	23,151	24,089	56,746
4,853,457	434,873	357,453	12,611	17,072	30,165	35,770
5,310,834	443,180	424,036	11,191	21,922	15,565	58,303
5,212,570	708,399	732,503	14,288	24,444	13,086	48,785
4,711,879	496,329	594,266	15,519	20,000	34,345	59,294
53,950,044	5,916,393	5,443,179	116,710	261,498	183,477	624,960
5,826,383	387,694	450,660	9,668	19,287	16,436	54,077
5,994,502	461,075	561,885	15,149	28,395	26,352	46,270
4,805,376	527,573	539,599	17,588	26,023	14,458	73,551
4,438,801	476,837	527,297	12,134	25,384	11,987	62,105
3,361,381	455,566	365,566	5,966	25,147	15,957	80,131
4,146,060	743,608	557,451	7,319	23,181	12,431	62,106
3,414,248	229,124	356,594	5,999	8,522	10,647	38,641
4,693,112	439,766	402,841	10,021	19,051	13,439	41,371
5,124,897	364,164	480,580	8,176	22,862	25,951	46,896
3,747,370	515,553	357,747	7,244	23,242	13,140	30,430
3,844,214	802,465	441,324	6,060	18,168	13,373	31,517
4,553,700	512,968	401,635	11,386	22,036	9,306	57,865

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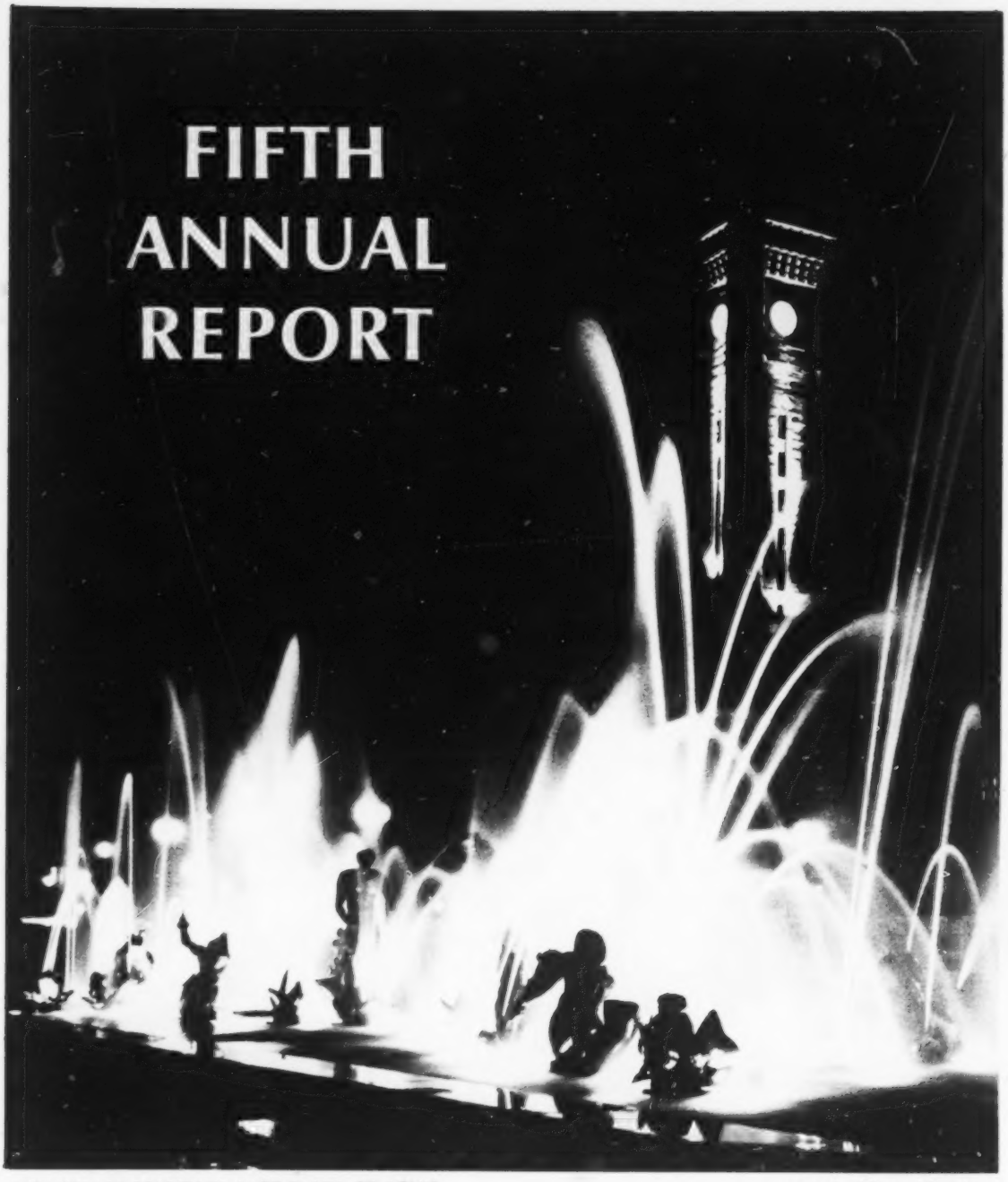
FIFTH ANNUAL REPORT



CARL MILLES FOUNTAIN, ALOE PLAZA, ST. LOUIS

photo by Missouri Tourism

FISCAL YEAR 1978-1979

MISSOURI

DIVISION OF FAMILY SERVICES
DEPARTMENT OF SOCIAL SERVICES

STATE OF MISSOURI
DEPARTMENT OF SOCIAL SERVICES
DIVISION OF FAMILY SERVICES

DAVID R. FREEMAN, DIRECTOR
DEPARTMENT OF SOCIAL SERVICES

JOHN ZUMWALT, DIRECTOR
DIVISION OF FAMILY SERVICES

ADULT SUPPLEMENTATION
AID TO DEPENDENT CHILDREN
GENERAL RELIEF
AID TO THE BLIND
BLIND PENSION
MEDICAID
SOCIAL SERVICES
CHILD WELFARE SERVICES
SERVICES TO THE BLIND
FOOD STAMP PROGRAM
CHILDREN'S RESIDENTIAL AND
DAY CARE LICENSING
SUPPORT ENFORCEMENT UNIT

P. O. BOX 88
BROADWAY STATE OFFICE BUILDING
JEFFERSON CITY, MISSOURI 65103

Honorable Joseph P. Teasdale
Governor of Missouri
State Capitol
Jefferson City, Missouri

Dear Governor Teasdale:

I am submitting the Fifth Annual Report of the Division of Family Services, covering the activities of the Division during the Fiscal Year, July 1, 1978-June 30, 1979.

Sincerely,

John Zumwalt

John Zumwalt
Director

JOSEPH P. TEASDALE
Governor

DEPARTMENT OF SOCIAL SERVICES
David R. Freeman
Director

DIVISION OF FAMILY SERVICES
John Zumwalt
Director

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Prepared by
Division of Planning and Budget
Research and Statistics
James Eastman, Director

PART I

REVIEW OF THE YEAR

Missouri's total welfare caseload decreased during Fiscal Year 1978-79. The average monthly number of recipients receiving cash benefits during the year was 241,140, a decrease of 26,134 persons (-9.7 per cent) from the previous year. This marked the sixth consecutive year in which welfare caseload receiving cash benefits has declined.

The welfare recipient count in Missouri as of June 1979 was 234,190, a decrease of 20,424 persons or 8.0 per cent from June 1978. Aid to Families with Dependent Children (AFDC) decreased 15,996 (-7.8 per cent), General Relief (GR) decreased 178 (-3.7 per cent), Supplemental Security Income-Supplemental Payments (SSI-SP) decreased 3,382 (-12.3 per cent); Supplemental Payments (SP only) decreased 979 (-10.7 per cent); Nursing Care (NC) decreased 15 (-0.1 per cent); Supplemental Aid to the Blind (ABS) increased 33 (4.1 per cent); and Blind Pension (BP) increased 93 (34.4 per cent).

AFDC is the largest of Missouri's welfare programs. The June 1979 AFDC recipient count of 187,807 is a decline of 15,996 persons (-7.8 per cent).

While the welfare caseload was decreasing there was an increase in total expenditures. During the 1978-79 fiscal year total cash assistance payments amounted to $181.1 million in state and federal exclusive of medical vendor payments and administrative costs. Compared with the preceding fiscal year, this represented an increase of $0.8 million or 0.4 per cent. Of the total assistance payments, the largest expenditure was for AFDC, totaling $143.0 million or 79.0 per cent of total costs, followed by NC whose expenditures totaled $18.7 million or 10.3 per cent of total costs. Costs for the remaining programs were as follows: SSI-SP, $9,247,275; SP only, $4,882,143; GR, $3,355,896; ABS, $1,287,161; and BP, $601,780.

A total of 110,443 applications were filed during the fiscal year, an increase of 12,939 (13.3 per cent). AFDC received the most applications, 52,471, followed by MA with 38,924. GR received 12,071 applications, NC, 5,788, ABS, 902, and BP, 287.

Applications disposed of for all programs totaled 107,519 which was an increase of 7,904 (7.9 per cent) from the previous fiscal year. Of the total dispositions, 62,380 (58.0 per cent) were approvals and 45,139 (42.0 per cent) were rejections. Compared with the previous fiscal year, the approval rate declined 1.0 per cent with an increase of 1.0 per cent in the rejection rate. Among the programs, AFDC dispositions totaled 51,507 of which 30,261 (58.8 per cent) were approvals and 21,246 (41.2 per cent) were rejections; MA dispositions totaled 38,076 including 22,920 approvals (60.2 per cent) and 15,156 rejections (39.8 per cent); dispositions for

AVERAGE MONTHLY NUMBER OF RECIPIENTS OF PUBLIC ASSISTANCE, BY PROGRAM AND FISCAL YEAR, 1938-1979

Fiscal Year	OAA	AFDC		GR		PTD	AB	NC	ABS	SSI-SP	SP
		Families	Persons	Cases	Persons						
1938	73,378	1,778	4,743	47,189	157,577						
1939	73,606	7,718	18,805	35,718	106,941						
1940	80,955	10,225	24,172	26,715	75,310						
1941	106,378	12,707	29,965	24,515	68,404						
1942	115,724	14,221	32,717	16,009	43,781						
1943	112,165	13,295	30,881	10,832	25,930						
1944	105,757	11,330	27,583	6,857	14,632						
1945	101,745	10,827	27,373	7,963	19,488						
1946	102,093	12,605	33,074	8,550	21,238						
1947	109,752	17,398	45,574	10,946	27,885						
1948	115,491	20,287	52,642	11,680	27,924						
1949	120,354	22,200	56,961	14,152	33,941						
1950	128,422	25,215	63,443	16,659	39,032						
1951	132,295	25,102	62,185	13,610	32,862	5,630					
1952	131,997	22,707	56,625	9,629	25,080	10,323	2,411				
1953	130,902	20,901	52,513	8,770	23,772	12,312	2,886				
1954	132,504	20,374	52,156	5,631	12,586	13,971	3,190				
1955	133,135	21,498	55,577	5,751	10,825	14,262	3,539				
1956	131,194	20,745	54,668	5,999	9,673	13,390	4,107				
1957	127,666	20,290	54,933	6,654	9,875	13,889	4,668				
1958	124,576	22,855	68,339	6,674	9,641	14,786	4,785				
1959	121,184	25,309	85,854	7,570	10,114	15,257	4,864				
1960	117,435	26,202	90,371	8,308	10,653	15,460	4,845				
1961	114,207	26,162	91,155	8,643	11,176	15,415	4,715				
1962	111,120	26,667	94,412	8,990	11,481	15,217	4,606				
1963	107,201	26,369	95,005	9,146	11,547	14,855	4,492				
1964	104,347	25,925	94,983	9,260	11,623	14,604	4,344				
1965	102,122	26,137	97,598	9,711	12,129	14,986	4,178				
1966	99,493	26,053	98,495	9,568	11,804	15,527	3,986				
1967	96,644	26,043	99,046	9,306	11,412	16,081	3,797				
1968	93,699	26,937	102,464	9,582	11,731	16,886	3,640				
1969	90,926	29,390	109,036	10,108	12,085	17,646	3,587				
1970	92,457	35,532	126,890	10,978	12,986	18,240	3,680				
1971	94,516	47,992	164,318	11,504	12,817	20,114	3,728				
1972	94,116	60,644	197,265	12,732	14,086	21,986	3,829				
1973	91,402	67,667	212,077	13,103	14,406	23,083	3,901				
1974	89,196	75,166	232,847	12,516	13,519	24,713	3,856	4,065	93	49,480	22,176
1975		82,253	257,544	10,394	11,110			7,876	735	45,539	16,167
1976		87,532	270,937	8,784	9,446			8,065	995	39,469	13,336
1977		88,521	267,276	7,004	7,453			8,553	1,007	33,978	11,397
1978		72,425	213,693	4,734	4,989			8,429	868	29,192	9,840
1979		65,044	193,340	4,128	4,324			8,243	802	25,535	8,591

GR numbered 11,601 including 5,120 approvals (44.1 per cent) and 6,481 rejections (55.9 per cent); NC dispositions totaled 5,195 with 3,640 approvals (70.0 per cent) and 1,555 rejections (30.0 per cent); ABS dispositions totaled 882 with 274 approvals (31.0 per cent) and 608 rejections (69.0 per cent); and BP dispositions totaled 258 with 165 approvals (64.0 per cent) and 93 rejections (36·0 per cent).

TOTAL EXPENDITURES FOR PUBLIC ASSISTANCE, BY PROGRAM, AND FISCAL YEAR 1938-1979

Fiscal Year	OAA	AFDC	GR	PTD	AB	NC	ABS	SSI-SP	SP
1938	12,407,623	342,126	5,430,577						
1939	16,151,567	2,380,524	4,810,694						
1940	17,037,284	2,707,655	3,856,881						
1941	21,221,407	4,132,952	3,791,235						
1942	18,104,257	3,950,547	2,764,492						
1943	23,890,278	4,927,905	2,176,355						
1944	26,878,738	4,394,982	1,841,408						
1945	27,868,325	4,325,823	2,238,578						
1946	32,030,620	5,377,414	2,271,776						
1947	43,773,933	7,247,857	3,689,517						
1948	48,367,344	9,770,235	3,839,362						
1949	59,336,897	13,848,585	5,344,683						
1950	66,627,001	16,023,757	6,403,771						
1951	69,118,200	15,714,967	5,171,714	2,378,006					
1952	69,282,883	14,222,932	3,526,972	5,741,225	1,078,821				
1953	77,034,015	14,658,219	3,571,655	7,456,502	1,761,390				
1954	79,608,808	15,922,557	2,384,007	8,707,148	2,105,070				
1955	79,420,974	17,360,112	2,705,460	8,885,736	2,335,630				
1956	78,220,706	17,051,415	3,118,375	8,361,923	2,918,880				
1957	81,849,555	19,318,849	3,998,203	9,306,784	3,361,260				
1958	81,495,992	23,794,310	4,142,584	10,019,843	3,445,260				
1959	81,053,332	26,156,515	5,874,885	10,543,468	3,599,115				
1960	83,068,603	28,507,672	6,151,620	11,311,297	3,779,360				
1961	81,963,485	27,912,058	6,350,232	11,481,705	3,677,635				
1962	79,258,672	29,794,349	7,318,387	11,304,733	3,592,810				
1963	79,567,118	29,917,907	6,721,724	11,480,742	3,637,010				
1964	80,196,615	29,835,215	7,445,476	11,739,412	3,835,736				
1965	78,773,629	30,556,796	7,807,689	12,168,215	3,759,825				
1966	79,734,067	31,449,727	7,724,156	13,091,000	3,758,043				
1967	81,197,534	32,394,367	7,652,289	14,053,457	3,645,440				
1968	79,159,737	33,305,844	7,716,287	15,026,646	3,682,830				
1969	78,815,269	38,651,363	7,876,469	15,463,287	3,714,851				
1970	84,478,099	48,601,131	9,129,746	16,945,965	3,963,653				
1971	86,204,380	64,544,254	9,541,025	18,591,620	4,071,334				
1972	85,624,951	78,748,819	10,119,529	20,091,304	4,524,659				
1973	89,424,484	84,705,621	11,091,726	23,597,794	4,838,788				
1974	44,617,046	101,659,101	10,469,550	12,871,627	2,519,846	2819,937	34,878	11060,121	9008,619
1975		118,930,671	8,365,649			17122,342	891,375	17883,478	10603,233
1976		136,241,804	7,159,310			17595,267	1231,753	14642,410	7621,464
1977		138,122,582	5,750,299			18927,290	1390,151	12185,667	6109,796
1978		140,276,364	3,861,274			18886,751	1185,080	10382,778	5319,213
1979		143,032,898	3,355,896			18668,908	1287,161	9247,275	4882,143

In addition to cash assistance payments, a total of $233.8 million was expended for medical services under the Title XIX Medicaid program. This was an increase of $29.5 million (14.4 per cent) over Fiscal Year 1977-78.

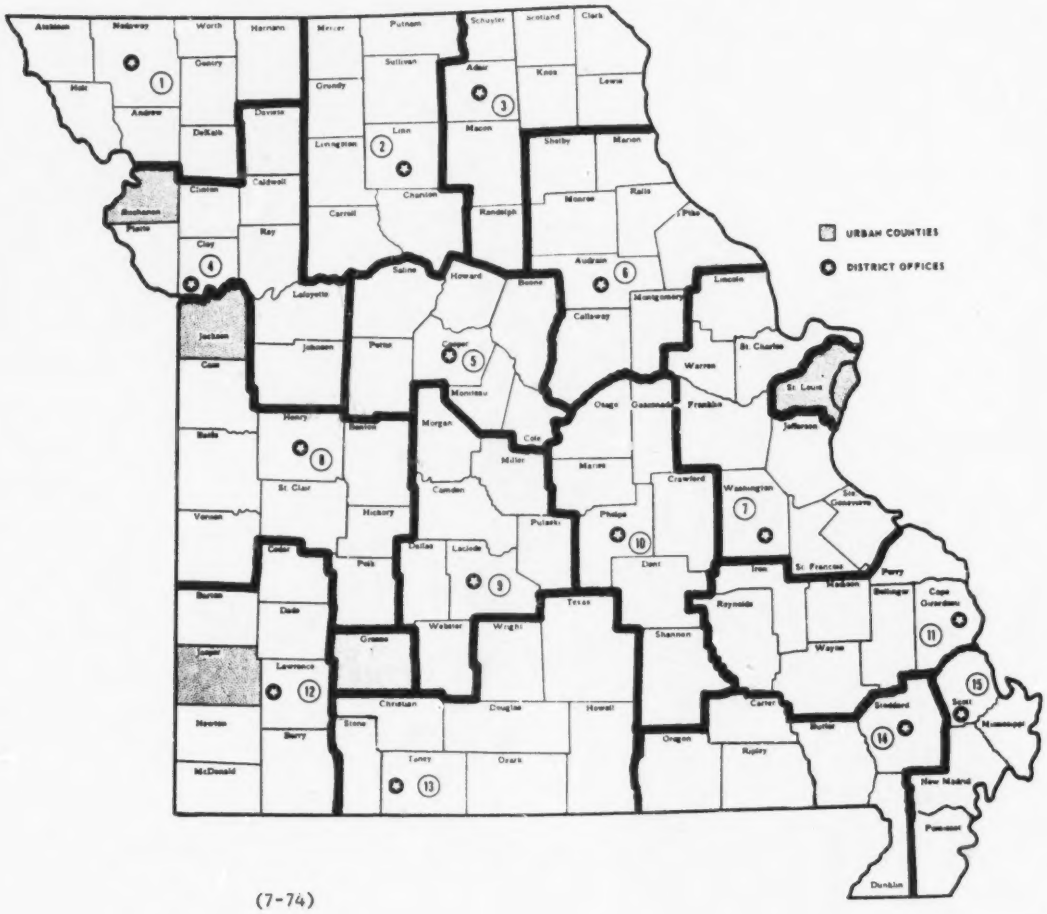
On October 1, 1975, Title XX of the Social Security Act was implemented in the State of Missouri, as it was throughout the United States. Title XX provides funding for the provision of social services to the low income families, including both public welfare and non-public welfare individuals. Some of the services provided under Title XX are adoptions,

AVERAGE MONTHLY PAYMENTS TO RECIPIENTS OF PUBLIC ASSISTANCE, BY PROGRAM AND FISCAL YEAR, 1938-1979

Fiscal Year	OAA	AFDC		GR		PTD	AB	NC	ABS	SSI-SP	SP
		Per Family	Per Person	Per Case	Per Person						
1938	14.09	32.07	12.02	9.59	2.87						
1939	18.28	25.70	10.55	11.22	3.75						
1940	17.53	22.07	9.33	12.03	4.27						
1941	16.62	27.10	11.49	12.89	4.62						
1942	13.04	23.15	10.06	14.39	5.26						
1943	17.75	30.89	13.30	16.74	6.99						
1944	21.18	32.33	13.28	22.38	10.49						
1945	22.83	33.30	13.17	23.43	9.57						
1946	26.14	35.55	13.55	22.14	8.91						
1947	33.24	34.72	13.25	28.09	11.03						
1948	34.90	40.13	15.47	27.39	11.46						
1949	41.08	51.98	20.26	31.47	13.12						
1950	43.23	52.96	21.05	32.03	13.67						
1951	43.54	52.17	21.06	31.67	13.11	46.93					
1952	43.74	52.20	20.93	30.52	11.72	46.35	50.00				
1953	49.04	58.44	23.26	33.94	12.52	50.60	50.00				
1954	50.07	65.13	25.44	35.28	15.78	51.94	55.00				
1955	49.71	67.29	26.03	39.20	20.83	51.92	55.00				
1956	49.69	68.50	25.99	43.32	26.86	52.04	60.00				
1957	53.43	79.34	29.31	50.07	33.74	55.84	60.00				
1958	54.52	86.76	29.02	51.73	35.81	56.47	60.00				
1959	55.74	86.12	25.39	64.67	48.41	57.59	60.00				
1960	58.95	90.67	26.29	61.70	48.12	60.97	65.00				
1961	59.81	88.91	25.52	61.23	47.35	62.07	65.00				
1962	59.44	93.11	26.30	67.84	53.12	61.91	65.00				
1963	61.85	94.55	26.24	61.24	48.51	64.40	70.00				
1964	64.05	95.90	26.18	67.00	53.38	66.99	75.00				
1965	64.28	97.43	26.09	67.00	53.64	67.66	75.00				
1966	66.78	100.60	26.61	67.27	54.53	70.26	80.00				
1967	70.01	103.66	27.26	68.53	55.88	72.83	80.00				
1968	70.40	103.04	27.09	67.11	54.81	74.16	84.31				
1969	72.23	109.59	29.54	64.94	54.31	73.88	86.30				
1970	76.14	113.98	31.92	69.30	58.59	77.42	89.76				
1971	76.01	112.07	32.73	69.11	62.03	77.03	91.01				
1972	75.82	108.21	33.27	66.23	59.87	76.15	98.47				
1973	81.53	104.32	33.28	70.54	64.16	85.19	103.37				
1974	83.37	112.71	36.38	69.71	64.54	86.81	108.91	173.43	93.76	37.25	67.71
1975		120.49	38.48	67.07	62.75			181.17	101.06	32.73	54.65
1976		129.71	41.90	67.92	63.16			181.81	103.16	30.92	47.62
1977		130.03	43.06	68.42	64.30			184.41	115.04	29.89	44.67
1978		161.40	54.70	67.97	64.50			186.72	113.77	29.64	45.05
1979		183.25	61.65	67.75	64.68			188.73	133.74	30.18	47.36

alcohol and drug abuse counseling, chore, day care, education services, employment services, family planning, foster care, home delivered and congregate meals, information and referral, legal assistance, and transportation. The specifics of this program are discussed in greater detail in Part V of this Annual Report, under the Social Services Section.

MISSOURI
DIVISION OF FAMILY SERVICES
ADMINISTRATIVE DISTRICTS



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ADMINISTRATIVE STAFF

There was a slight decrease of 89 persons or 1.6 per cent in the number of persons employed by the Division of Family Services between the end of June 1978 and the end of June 1979. A total of 5,446 persons were employed by the Division of Family Services at the end of June 1979 (Fiscal Year 1979) as compared to 5,535 persons in Fiscal Year 1978. The distribution of employees within the field offices was the following: 115 county directors, 306 income maintenance supervisors, 1,563 income maintenance caseworkers, 1,166 social service workers and caseworkers, 265 social service supervisors, 1,188 clerical staff and support workers, 95 workers in the blind district offices, 131 child support enforcement personnel, and 142 other professional caseworkers and labor and trade employees. These figures reflect both full and part time personnel. State office personnel totaled 475.

Table 1. Number of Employees of the Division of Family Services, Replacements and Separations, July 1978-June 1979

Month	Number of Employees at Beginning of Month	Number of Replacements or Additions	Number of Separations	Number of Employees at End of Month
TOTAL	XXXX	1,221	1,310	XXXX
1979				
June	5,705	90	349	5,446
May	5,668	101	64	5,705
April	5,696	87	115	5,668
March	5,650	129	83	5,696
February	5,648	67	65	5,650
January	5,617	109	78	5,648
1978				
December	5,571	110	64	5,617
November	5,546	107	82	5,571
October	5,491	123	68	5,546
September	5,465	119	93	5,491
August	5,570	63	168	5,465
July	5,535	116	81	5,570

In Fiscal Year 1979,the number of staff additions totaled 1,221, compared with 1,310 separations, resulting in an overall separation rate of 24 per 100 employees, or 1 per cent more than during the previous fiscal year.

PART II

LEGISLATIVE DEVELOPMENTS

The First Regular Session of the 80th General Assembly which convened on January 3, 1979 and adjourned on June 30, 1979, enacted the following legislation affecting the Division of Family Services:

SB 671 - This bill provided that services of podiatrists shall be available to all eligible persons under the medical assistance benefits program, Section 208.152. The bill was approved by the Governor on June 15, and went into effect on August 13, 1978.

HB 881 - This bill provided for an increase in monthly blind pensions to $160. The bill was approved by the Governor on June 8 and went into effect on August 13, 1978.

HB 972 - This bill provided for certain changes in the conditions of and procedures for termination of parental rights. The bill was approved by the Governor on June 13 and went into effect on August 13, 1978.

HB 1684 - This bill provided that adoption subsidies are to be paid only for children who are eligible for foster payments under the homeless, dependent, and neglected children program. This bill was approved by the Governor on June 14 and went into effect on August 13, 1978.

HB 88 - This bill provided that any person authorized to provide services for which benefit payments are authorized under the Medicaid Statute and whose claim for reimbursement is denied or is not acted upon with reasonable promptness, or any person who is authorized to provide services for which benefit payments are authorized under the Medicaid Statute and who is denied participation in any programs established under Chapter 208, RSMo, or any such person who is aggrieved by any rule or regulation promulgated by the Department of Social Services or any division therein shall be entitled to a hearing before the Administrative Hearing Commission pursuant to the provisions of Chapter 161,RSMo, provided however, that no person providing such service may petition for a hearing unless the amount for which he seeks reimbursement exceeds $500. The bill further provided that if there are one or more providers having similar claims a hearing may be instituted on behalf of all providers in the class if there is a common question of law or fact affecting the several rights and a common relief is sought.

The bill also amended Chapter 161 relating to the Administrative Hearing Commission to provide for an additional commissioner and compensation for the additional duties imposed by the provisions of House Bill 88. The bill was approved by the Governor on August 6 and went into effect on September 28, 1979.

SCS for HCS for HBs 545, 21, and 485 - This bill established the Utilicare and Emergency Assistance Programs.

The Utilicare portion provided that the Department of Social Services shall issue a "utilicare card" to applicants age 65 and over and whose income for the prior calendar year does not exceed $7,500, the application being made annually. Cards must be issued within 5 working days of the date of application; applications may be made by mail. Card holders may request a $50 payment toward payment of a utility bill for the months of December, January, and February, or 50 per cent of bills for each of the months if the amount is less than $50, with the primary supplier billing the Department of Social Services for reimbursement. An amount not exceeding $150 for the covered months may be paid to suppliers of heating fuels not delivered on a regular monthly basis, such as wood, coal, propane gas, and heating oil, with such amount not to exceed 50 per cent of the heating bill for the covered period. Not more than $5,140,000 from general revenue shall be appropriated for the support of the program for any fiscal year, except that after the first fiscal year, the amount may be increased by a percentage reflecting the national cost of living index or 7 per cent, whichever is lower.

The Emergency Assistance portion provided for the Department to develop a plan whereby one-time financial grants, either money payments or vendor payments or payments in kind, shall be made to qualified families when a crisis situation exists which threatens the family and creates urgent needs with respect to food, clothing, utility or shelter (utility expenses paid only when the applicant is ineligible for assistance under the Federal Utility Crisis Intervention program). Such assistance may be authorized during only one period of thirty consecutive days in any twelve consecutive months. One-half of cost of providing emergency assistance shall come from general revenue, the balance from federal funds. If the applicant qualifies, assistance is to be granted within three days of application properly completed. A ceiling is provided of $300,000 from general revenue to support the program, with not more than 3 per cent of the funds appropriated being used for administrative purposes.

The bill was approved by the Governor on July 31 and went into effect on September 28, 1979. Funds were appropriated for the Utilicare portion of the bill, but not for the Emergency Assistance portion. Therefore, only the Utilicare portion was in operation.

DIVISION OF FAMILY SERVICES
APPROPRIATIONS FOR THE 1979-80 FISCAL YEAR
FIRST REGULAR SESSION, 80th GENERAL ASSEMBLY

	Total	State	Federal
TOTAL	528,513,234	235,760,390	284,817,795
Income Maintenance: (Total)	235,458,655	130,652,813	104,805,842
Assistance Programs--			
Aid to Families with Dependent Children	152,050,536	61,124,315	90,926,221
Blind Pensions	842,775	842,775	
Adult Supplementation	11,387,000	11,387,000	
Blind Supplementation	4,464,000	4,464,000	
General Relief	3,218,280	3,218,280	
Nursing Care	36,369,660	36,369,660	
Indo-Chinese Refugee Assistance	900,000		900,000
Administration	26,126,404	13,206,783	12,919,621
AFDC Monthly Income Reporting System	100,000	40,000	60,000
Social Services: (Total)	66,864,199	11,985,831	47,093,399
Vendor Programs--			
Homeless, Dependent and Neglected Children	6,336,589	5,062,070	1,274,519
Residential Treatment of Homeless, Dependent and Neglected Children	4,610,340	1,152,585	3,457,755
Child Abuse and Neglect Multi-Disciplinary Treatment	1,110,000	250,000	860,000
Purchase of Day Care	5,229,810	872,740	4,357,070
AFDC Work Training	400,000	400,000	
Purchase of Service Expenditures to Organizations	26,580,835*		19,935,626
Title XX Vendor Training	2,133,333*		1,600,000
Administration	20,198,509*	4,182,240	15,409,842
Administration of St. Louis City Foster Care Program	264,783	66,196	198,587
Medical Services: (Total)	193,338,209	81,059,131	112,279,078
Vendor Payments--			
Mental Hospitals	3,495,154		3,495,154
Dental Services	5,842,927	2,430,658	3,412,269
Drugs and Pharmacist Fees	22,726,102	9,317,702	13,408,400
Physician Services	21,891,628	9,457,183	12,434,445
Special Adult Services	9,824,282	4,154,689	5,669,593
Inpatient Hospital	97,811,213	42,802,187	55,009,026
Outpatient Hospital	19,085,450	8,050,243	11,035,207
Other Services (Buy-In, Children's Services, Family Planning, Ambulance, Podiatric Services, Laboratory and X-ray, Home Health Services, EPSDT and Optometric Services)	10,358,652	3,864,877	6,493,775
Administration	2,302,801	981,592	1,321,209
Services for the Blind: (Total)	3,527,921	1,034,366	2,493,555
Services for the Visually Impaired (Vendor Payments)	2,021,000	508,000	1,513,000
Administration	1,506,921	526,366	980,555
Title IV-D Child Support Enforcement: (Total)	10,666,759	3,450,393	7,216,366
Reimbursements--			
Reimbursements to Counties	5,000,000		5,000,000
Federal Reimbursement and Local Incentives	2,711,605	2,711,605	
Administration	2,955,154	738,788	2,216,366
Administrative Services:			
Administration	18,657,491**	7,577,856	10,929,555

*Includes $6,645,209 Donated Funds, $533,333 Local Funds, and $606,427 Donated Funds, respectively.
**Includes $150,080 Donated Funds.

PART III

REVIEW OF PUBLIC ASSISTANCE PROGRAMS

AID TO FAMILIES WITH DEPENDENT CHILDREN - REGULAR

Aid to Families with Dependent Children is a federal-state program of public assistance which provides assistance to children under 18 years of age who are deprived of support due to the absence of one or both parents from home by reason of death, continued absence or physical or mental incapacity. Effective July 1, 1977, aid to families also included those under 21 years and a student regularly attending a school, college or university, or regularly attending a course of vocational or technical training designed to fit him for gainful employment. The primary objective of this program is to provide assistance to children in their own homes who became dependent through no fault of their own. Its basic philosophy is focused on keeping families intact and thereby permitting children to obtain the benefits associated with normal family life. First payments in Missouri under this program were started in 1938.

Maximum benefits for AFDC families were revised in July 1977. Prior to July 1977, maximum benefits were fixed by law at $56 for the first child, $44 for the eligible adult relative, and $35 for each additional

Table 2. Number of Recipients and Amount of Payments for Aid to Families with Dependent Children, July 1978-June 1979*

Month	Recipients			Amount of Payments		
	Families	Children	Persons	Total	Average	
					Per Family	Per Person
TOTAL	XXXX	XXXX	XXXX	143,032,898**	XXXX	XXXX
1979						
June	63,265	128,792	187,807	11,605,406	183.44	61.79
May	64,020	130,473	190,310	11,757,208	183.65	61.78
April	64,150	130,925	191,003	11,801,114	183.96	61.78
March	64,276	131,469	191,735	11,813,908	183.80	61.62
February	63,607	130,662	190,150	11,681,017	183.64	61.43
January	64,239	131,949	191,841	11,782,678	183.42	61.42
1978						
December	63,956	131,759	191,085	11,725,245	183.33	61.36
November	64,337	132,831	192,264	11,807,691	183.53	61.41
October	65,269	135,149	195,017	11,981,463	183.57	61.44
September	66,147	136,980	196,538	12,100,892	182.94	61.57
August	68,673	141,547	201,241	12,502,155	182.05	62.13
July	68,527	141,693	201,091	12,474,121	182.03	62.03

* For data prior to July 1978, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

** Does not include retroactive and deficiency payments and AFDC-FC data but does include AFDC-UF data.

child. In July 1977, the maximum payment was changed to a fixed percentage of need standard assigned a given assistance group size. For Fiscal Year 1978-1979 the "percentage of need" was 70 per cent compared to 65 per cent in Fiscal Year 1977-78. In determining payment, the budgetable income of recipients is compared to the "percentage of need standard" rather than the full need standard. The practical effect of these changes is to close many AFDC cases that have income and to increase the payments to families with little or no income.

This slight increase in "percentage of need" formula caused a decline in the July caseload. There were 401 fewer families and 2,712 fewer persons receiving AFDC than in June. This was less than one per cent in families and one per cent decrease in persons.

One of the factors influencing caseload trends is application activity, especially by the number of applications received and disposed of. A total of 52,471 applications were received during the Fiscal Year 1978-1979, which was an increase of 4,292 or 8.9 per cent from the prior year. There was a slight increase in the average monthly number of applications during the year. In Fiscal Year 1978-1979, it was 4,373 applications compared with 4,015 during the previous year. Regarding those applications that were disposed of, an increase of 5.5 per cent occurred during Fiscal Year 1978-79. A total of 51,507 applications were disposed of during Fiscal Year 1978-1979 compared with 48,835 during the previous year. Total dispositions during the year was 51,507, 30,261 or 58.8 per cent were eligible and 21,246 or 41.2 per cent were found ineligible. This reflects no change from the previous year. Pending applications at the close of the fiscal year totaled 3,138; this was an increase of 858 or 37.6 per cent from the prior year.

Total expenditures in 1978-1979 were $143.0 million, which was an increase of $2.7 million (1.92 per cent) compared with 1977-1978. Average monthly costs were $11.92 million compared with $11.69 million in the previous year. The June 1979 average payment of $183.44 per family was an increase of $15.64 from June 1978. The June 1979 payment per person of $61.79 was a slight increase of $5.04 over June 1978.

Table 3. Applications for Aid to Families with Dependent Children Received, Disposed of, and Awaiting Disposition at End of Month, July 1978-June 1979*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month/
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	52,471	51,507	30,261	21,246	XXXX
1979					
June	4,419	3,698	2,184	1,514	3,138
May	4,171	4,055	2,488	1,567	2,430
April	3,876	4,015	2,518	1,497	2,320
March	4,346	4,618	2,725	1,893	2,458
February	3,915	3,816	2,240	1,576	2,738
January	4,809	4,409	2,608	1,801	2,637
1978					
December	3,785	4,141	2,473	1,668	2,249
November	4,218	4,184	2,487	1,697	2,615
October	4,658	4,769	2,769	2,000	2,598
September	4,703	4,644	2,635	2,009	2,724
August	5,009	4,783	2,659	2,124	2,672
July	4,562	4,375	2,475	1,900	2,460

* For monthly data prior to July 1978, see Annual Report for Division of Family Services, 1977-1978, p. 15.

** Includes such reasons as change of residence, voluntary withdrawal and another form of assistance considered more appropriate (see Table 5).

/ Figure does not always agree with number carried over as pending at first of following month because of adjustments in previous figures.

Listed in Table 4 are the cases opened for Aid to Families with Dependent Children by Reason for Opening. A total of 30,261 applications were found eligible for assistance. Consistent with prior years, the largest number who were eligible for AFDC was from the category of desertion. separation or divorce of parents, and accounted for 24,818 or 82 per cent of the total. This was by far the leading single cause of need and was followed by loss of employment benefits through illness, disablement or layoff for 2,928 or 9.7 per cent of all openings. These data and other reasons for opening data are displayed in Table 4.

Table 4. Cases Opened for Aid to Families with Dependent Children by Reason for Opening, July 1978-June 1979

Reason for Opening	Number	Per Cent
TOTAL	30,261	100.0
Change in economic circumstances because of:		
Loss of employment benefits to persons in home		
Illness or disablement	1,671	5.5
Lay-off, discharge, or other reason	1,257	4.2
Resources exhausted	122	0.4
Desertion, separation or divorce of parents	24,818	82.0
Parent or parents institutionalized or incarcerated	438	1.4
Loss of a wage earner in home by death	503	1.7
Loss or reduction of income from outside the home	282	0.9
Other loss of income	353	1.2
No material change in economic circumstances:		
Transfer from other assistance	124	0.4
Other	693	2.3

Table 5 gives reasons for rejection of applications. The category classified as "ineligible because of sufficient income or resources" accounted for 8,056 rejections or 37.9 per cent of the total. About one-third (32.1 per cent) of the rejections resulted from reasons other than points of eligibility such as voluntary withdrawal of applications, moving out of state, and other miscellaneous reasons. About 3 out of 10 rejections (30 per cent) were due to "reasons other than insufficient need". Among the items in this category are instances of the child or children not being deprived of parental support, failure to furnish necessary information, child not living with specified relative, or unable to meet disability requirement.

Table 5. Applications Rejected for Aid to Families with Dependent Children, by Reason for Rejection, July 1978-June 1979

Reason for Rejection	Number	Per Cent
All Applications Rejected	21,246	100.0
Ineligible because of sufficient income or resources	8,056	37.9
Available resources of applicant	7,988	37.5
Receipt of Veterans Benefits, employer pension, or other public assistance	33	0.2
Other resources or not classified by specific source of income	35	0.2
Ineligible for reasons other than insufficient need	6,371	30.0
Child not deprived of parental support	1,201	5.7
Failure to furnish necessary information or comply with agency policy	4,727	22.2
Unable to meet disability requirement	91	0.4
Child not living with specified relative	352	1.7
Rejected for reasons other than points of eligibility given above	6,819	32.1
Voluntarily withdrew application	4,228	19.9
Moved out of state or could not be located	1,029	4.8
All other reasons	1,562	7.4

As indicated in Table 6, a total of 36,002 closings were made during Fiscal Year 1978-1979. The largest number of closings 8,588 or 23.9 per cent were because of obtainment of employment or increased earnings or other economic resources. Another 7,236 or 20.1 per cent voluntarily requested termination of their payments. A total of 6,745 or 18.7 per cent were closed because of all other reasons for loss of eligibility such as parent no longer incapacitated, refusal to comply with agency policy after acceptance, and refusal to give necessary information.

Table 6. Number of Aid to Families with Dependent Children Cases Closed, by Reason for Closing, July 1978-June 1979

Reason for Closing	Number	Per Cent
All cases closed	36,002	100.0
Decreased need:		
Obtainment of employment or increased earnings by payee or others in household and other economic reasons*	8,588	23.9
Receipt of OASDHI or other Federal or State Benefits or Pensions	1,664	4.6
Receipt of or increase in Child Support from absent parent	94	0.3
Loss of eligibility other than decreased need:		
Child attained maximum age	41	0.1
Moved out of state or could not be located	5,372	14.9
Voluntary request of discontinuance	7,236	20.1
All other reasons for loss of eligibility**	6,745	18.7
All other reasons ≠	6,262	17.4

* Includes resources other than earnings of parents or other persons in home, increased support from persons outside home, and cases where children were not deprived of parental support for reasons not otherwise classified.

** Includes such reasons as parent no longer incapacitated, refusal after acceptance to comply with agency policy, and refusal to give necessary information.

≠ Child admitted to child-caring agency or institution, death of dependent child, no longer an eligible child in the home, transferred to other assistance, change in payee and change in law or agency policy.

Every two years, the Division of Family Services conducts a survey concerning the characteristics of Aid to Families with Dependent Children families. The most recent survey was in March 1977. Some of the principal findings of the survey are briefly reviewed below.

One-half (49.99 per cent) of AFDC families are white and one-half (49.50) are black. Contrary to popular opinion, most AFDC families consist of 1 to 3 children. The 1 to 3 child families account for 84.3 per cent of all AFDC families. Two out of three AFDC families (66.65 per cent) have 1 or 2 children.

Of the 86,346 AFDC recipients in March 1977, there were 23.8 per cent that had received AFDC for one year or less.

The reason for dependency in most cases (91.1 per cent) is due to the absence of the father from the home for reasons other than death. Only 3.5 per cent are eligible because of the death of the father and 4.5 per cent because of the mental or physical incapacity of the father. Absence of the father for reasons other than death has increased rapidly since the

beginning of the AFDC program in 1938. In 1938, this reason accounted for 52 per cent of the cases, and has increased each year since. Only 0.9 per cent of the reasons for dependence were related to being deprived of the mother's support.

The age distribution of AFDC children shows that 28.1 per cent are less than age 6 and that 78.4 per cent are less than age 14.

According to the 1977 Study, 29.68 per cent of AFDC mothers work full time and another 10.96 per cent work part time. Due to the changes in the AFDC program in July 1977, many cases with working mothers were closed. Thus the actual per cent of AFDC mothers that worked during Fiscal Year 1977-78 is considerably lower than the AFDC Study statistics.

AID TO FAMILIES WITH DEPENDENT CHILDREN-UNEMPLOYED FATHER PROGRAM

Missouri had operated an Aid to Families with Dependent Children-Unemployed Father program from July 1, 1968 to December 31, 1971. Since the Seventy-sixth General Assembly failed to enact legislation extending this program, it automatically terminated as of December 31, 1971. The Seventy-seventh General Assembly reinstated the Aid to Families with Dependent Children-Unemployed Father program in July 1973, but at that time only unemployed stepfathers or adoptive parents in the home were included; unemployed natural fathers were not included in the program. The Seventy-eighth General Assembly extended the program to include natural fathers and removed the stepfathers as eligible payees. This law became effective July 15, 1975.

Table 7. Number of Recipients and Amount of Payments for Aid to Families with Dependent Children-Unemployed Fathers, July 1978-June 1979*

Month	Recipients			Amount of Payments		
	Families	Children	Persons	Total	Average	
					Per Family	Per Person
TOTAL	XXX	XXX	XXX	1,517,026	XXX	XXX
1979						
June	564	1,510	2,638	143,027	253.59	54.22
May	600	1,596	2,796	153,073	255.12	54.75
April	640	1,713	2,993	164,009	256.26	54.80
March	667	1,750	3,084	169,498	254.12	54.96
February	591	1,577	2,759	150,840	255.23	54.67
January	511	1,370	2,392	131,102	256.56	54.81
1978						
December	426	1,155	2,007	109,206	256.35	54.41
November	392	1,058	1,842	101,396	258.66	55.05
October	386	1,078	1,850	100,736	260.97	54.45
September	395	1,097	1,887	102,685	259.96	54.42
August	355	1,037	1,747	92,811	261.44	53.13
July	379	1,082	1,840	98,643	260.27	53.61

* This data is included in Table 2.

As indicated in Table 7, a total of $1,517,026 was paid as Aid to Dependent Children of Unemployed Fathers during Fiscal Year 1978-1979. The average payment per person ranged from $53.13 to $55.05.

AID TO FAMILIES WITH DEPENDENT CHILDREN - FOSTER CARE PROGRAM

The Seventy-second General Assembly enacted legislation (Section 208.047, Laws of Mo. 1969) which provides for the continuation of Aid to Families with Dependent Children benefits to certain neglected and/or abused children who are removed from their parents or relatives custody by court order. This legislation became effective October 13, 1963.

Under provisions of this law the Juvenile Courts are authorized to place in the care and custody of the Division of Family Services children who need foster care because of unsatisfactory home conditions which are detrimental to their welfare.

The Division of Family Services places those children in foster family homes or non-profit child-caring institutions. To be eligible for these benefits children must have received Aid to Families with Dependent Children benefits in and for the month in which the court proceedings leading to such a determination were started, or would have received Aid to Families with Dependent Children benefits for that month if application for such assistance had been made. Aid to families with Dependent Children-Foster Care can also be provided to children who have been living with an eligible Aid to Families with Dependent Children parent or relative within six months prior to the month in which such proceedings were started if such eligible parent or relative had made application for Aid to Families with Dependent Children.

During the absence of the child or children from the home, every effort is made to improve conditions in the home so that the child or children can be returned to the home as soon as possible.

As can be seen in Table 8, the number of children receiving Aid to Families with Dependent Children-Foster Care averaged 2,123 children per month compared to 2,094 children in the prior fiscal year. A total of $2,499,120 or $208,260 per month was paid for the year. The payment per child varied during the year from $97.78 to $98.84.

Table 8. Number of Children and Amount of Payments for Aid to Families with Dependent Children-Foster Care, July 1978-June 1979

Month	Number of Children	Amount of Payments	Average Per Child
TOTAL	XXXX	2,499,120	XXXX
1979			
June	2,203	216,462	98.26
May	2,220	219,433	98.84
April	2,166	212,518	98.12
March	2,190	214,478	97.94
February	2,070	202,523	97.84
January	2,108	206,111	97.78
1978			
December	2,121	207,550	97.85
November	2,100	205,422	97.82
October	2,073	203,501	98.17
September	2,091	205,757	98.40
August	2,072	203,742	98.33
July	2,059	201,623	97.92

GENERAL RELIEF

State funds entirely finance General Relief which provides assistance to needy unemployed persons. For the most part, people who are physically or mentally incapacitated and unable to work are eligible for this type of assistance. Single employable persons or families with any employable members are not eligible for this type of assistance. The maximum payment under this program is set at $70 per person per month.

In Fiscal Year 1978-79, the General Relief caseload showed a decrease compared with the prior fiscal year. In June 1979, a total of 4,513 received assistance which was a decrease of 178 persons (3.8 per cent) from the preceding year. The average caseload was 4,324 persons which was 660 fewer persons a month or a decrease of 13.2 per cent from the prior year.

Table 9. Number of Recipients and Amount of Assistance for General Relief, July 1978-June 1979*

Month	Recipients				Amount of Assistance		
	Number of Persons in Cases	Number of Cases			Total	Average	
		Total	Family	Single Person		Per Person in Case	Per Case
TOTAL	XXXX	XXXX	XXXX	XXXX	3,355,896	XXXX	XXXX
1979							
June	4,513	4,287	205	4,082	293,528	65.04	68.47
May	4,279	4,085	191	3,894	276,826	64.69	67.77
April	4,292	4,086	203	3,883	276,740	64.48	67.73
March	4,267	4,060	204	3,856	274,762	64.39	67.68
February	4,141	3,942	197	3,745	267,021	64.48	67.74
January	4,172	3,986	183	3,803	269,690	64.64	67.66
1978							
December	4,212	4,030	180	3,850	272,900	64.79	67.72
November	4,225	4,045	179	3,866	273,565	64.75	67.63
October	4,331	4,138	191	3,947	280,515	64.77	67.79
September	4,395	4,206	187	4,019	285,161	64.88	67.80
August	4,452	4,249	201	4,048	287,981	64.69	67.78
July	4,606	4,385	207	4,178	297,207	64.53	67.78

* For Data prior to July 1978, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

A decrease occurred in total payments for Fiscal Year 1978-1979. Total payments were $3,355,896, a decrease of $505,378 (13.1 per cent) from the preceding fiscal year. However, average payments per person of $65.04 in June 1979 represented an increase of $0.42 per person over June 1978.

As indicated in Table 10, applications received and applications disposed of in Fiscal Year 1978-79 increased from the previous year. A total of 12,071 applications were received which was an increase of 1,551 applications or 14.7 per cent from the preceding year. Applications disposed of totaled 11,601 including 5,120 approvals and 6,481 rejections. Approvals increased only 1.3 per cent or 68 applications and rejections increased by 506 applications or 8.5 per cent higher than the prior fiscal year.

Table 10. Applications for General Relief Received, Disposed of, and Awaiting Disposition at End of Month, July 1978-June 1979

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month*
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons	
TOTAL	12,071	11,601	5,120	6,481	XXX
1979					
June	1,361	1,165	646	519	1,049
May	1,150	1,040	480	560	857
April	1,034	963	502	461	749
March	1,000	975	458	517	681
February	840	861	379	482	659
January	1,004	956	370	586	682
1978					
December	855	878	373	505	638
November	875	865	371	494	663
October	952	908	366	542	653
September	933	970	403	567	611
August	1,068	1,067	410	657	650
July	999	953	362	591	653

* Figure does not always agree with number carried over as pending at first of following month because of adjustments in previous figures.

As shown in Table 11, illness or disablement accounted for over nine-tenths (90.8 per cent) of the openings for General Relief for the year. Various other reasons constituted the next largest category (6.5 per cent) followed by transfer from other assistance (1.0 per cent).

Table 11. Cases Opened for General Relief by Reason for Opening, July 1978-June 1979

Reason for Opening	Number	Per Cent
TOTAL	5,120	100.0
Change in economic circumstances because of:	4,735	92.5
Loss of employment benefits to persons in home		
Illness or disablement	4,648	90.8
Lay-off, discharge, or other reason	20	0.4
Resources exhausted	30	0.6
Loss of a wage earner in home by death		
Loss or reduction of income from outside the home	16	0.3
Other loss of income	21	0.4
No material change in economic circumstances:	385	7.5
Transfer from other assistance	53	1.0
Other	332	6.5

Table 12 lists the number of General Relief cases closed and the reasoning behind the closing. A total of 5,164 closings in Fiscal Year 1978-1979 occurred. Of this total number 62.8 per cent were closed due to approval and receipt of another type of public assistance in the household and all other reasons, such as refusal after acceptance to comply with agency policy, etc. (Look at caveat under Table 12 for other examples of all other reasons.)

Table 12. Number of General Relief Cases Closed, by Reason for Closing, July 1978-June 1979

Reason for Closing	Number	Per Cent
All cases closed	5,164	100.0
Obtainment of employment or increased earnings of person in home	23	0.4
Receipt of another type of public or private aid	1,622	31.4
Death	131	2.5
Ineligible--need decreased	65	1.3
Could not be located	444	8.6
Voluntary request of discontinuance	465	9.0
Transferred to other assistance	519	10.1
Change in law or agency policy		
Do not continue to meet disability requirement	273	5.3
All other reasons*	1,622	31.4

* Includes such reasons as refusal after acceptance to comply with agency policy, value of property increased beyond agency maximum, admitted to institution, employable person in household, emergency met, change in payee and refusal to obtain medical examination.

BLIND PENSION

Established in 1921, the Blind Pension program provides monthly pensions to blind residents of Missouri. This program is financed entirely from state funds derived from a special property tax. The objective of the Blind Pension program is to provide for the needs of blind persons who are unable to qualify for benefits under the State Aid to the Blind program. Blind Pension payments are set by law at $160 per month, in the previous year it was $135 per month. Recipients may receive a maximum of $200 if residing in a practical nursing home.

Table 13. Number of Recipients and Amount of Payments for Blind Pension, July 1978-June 1979*

Month	Number of Recipients	Amount of Payments
TOTAL	XXX	601,780
1979		
June	363	58,400
May	348	56,040
April	333	53,600
March	321	51,680
February	318	51,280
January	325	52,440
1978		
December	321	51,800
November	311	50,085
October	310	49,925
September	301	48,485
August	293	40,315
July	276	37,730

* For data prior to July 1978, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

A total of 363 persons received Blind Pension payments in June 1979. This was an increase of 93 (34.4 per cent) recipients over June 1978. Total payments in Fiscal Year 1978-1979 were $601,780, an increase of $164,834 (37.7 per cent) from the prior fiscal year (Table 13).

Table 14. Report on Number of Blind Pension Recipients, Additions and Closings, July 1978-June 1979

Case Load	Recipients
On roll beginning of year	270
Added during year	165
Total during year	435
Closed during year	61
On roll at end of year	374

SUPPLEMENTAL NURSING CARE

Initiated January 1, 1974, supplemental nursing care payments are made to certain eligible adults residing in licensed professional, practical or domiciliary nursing homes. The person must meet the December 1973 eligibility requirements for old age assistance, permanently and totally disabled or aid to the blind. Persons who are eligible for state supplemental payments, aid to families with dependent children, general relief, blind pension, or aid to the blind supplemental payments, or eligible for vendor payments in their behalf for professional nursing home or an intermediate care facility, may not receive nursing care benefits.

The maximum payment for persons eligible for nursing care in licensed practical nursing homes is $200 per month and $150 per month in domiciliary nursing homes.

Table 15. Number of Recipients and Amount of Payments for Supplemental Nursing Care, July 1978-June 1979*

Month	Number of Recipients	Amount of Payments	
		Total	Average per Recipient
TOTAL	XXXX	18,668,908	XXXX
1979			
June	8,329	1,573,380	188.90
May	8,091	1,534,718	189.68
April	8,066	1,530,058	189.69
March	8,182	1,553,868	189.91
February	8,109	1,537,557	189.61
January	8,212	1,553,846	189.22
1978			
December	8,224	1,552,642	188.79
November	8,300	1,565,208	188.58
October	8,360	1,574,819	188.38
September	8,344	1,570,448	188.21
August	8,320	1,563,287	187.90
July	8,310	1,559,077	187.61

* For data prior to July 1978, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

As reported in Table 15, as of June 1979 there were 8,329 recipients of supplemental nursing care, 15 (0,2 per cent) less than in June 1978. The highest number of recipients per month was 8,360 in October 1978 and the lowest number of recipients per month was 8,066 in April 1979. The monthly average number of recipients was 8,237. Total payments for the year were $18,668,908; the average payment per recipient was $188.87.

A total of 5,788 applications were received in Fiscal Year 1978-79.Of the 5,195 applications disposed of, 3,640 were approved for assistance and 1,555 were rejected. There were 864 applications awaiting disposition at the end of June 1979.

Table 16. Applications for Supplemental Nursing Care Received, Disposed of, and Awaiting Disposition at End of Month, July 1978-June 1979*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month/
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	5,788	5,195	3,640	1,555	XXX
1979					
June	1,249	1,128	910	218	864
May	826	380	240	140	747
April	407	380	249	131	301
March	394	384	256	128	274
February	332	327	236	91	265
January	387	369	238	131	261
1978					
December	326	318	210	108	244
November	333	312	223	89	240
October	348	357	238	119	223
September	371	408	284	124	233
August	421	442	289	153	272
July	394	390	267	123	293

* For monthly data prior to July 1978, see Annual Report for Division of Family Services 1977-1978, p. 24.

** Includes such reasons as death, change of residence, and voluntary withdrawal (see Table 19).

/ Figure usually does not agree with number carried over as pending at first of following month due to adjustment in previous figures.

Among the reasons for opening was illness or disablement. This category comprised 42.7 per cent of openings in Fiscal Year 1978-79. The next largest reason for opening was resources were exhausted (26.6 per cent).

Table 17. Cases Opened for Supplemental Nursing Care by Reason for Opening, July 1978-June 1979

Reason for Opening	Number	Per Cent
TOTAL	3,640	100.0
Change in economic circumstances because of:	2,532	69.6
Loss of employment benefits to persons in home		
Illness or disablement	1,556	42.7
Lay-off, discharge, or other reason	2	0.1
Resources exhausted	968	26.6
Loss or reduction of income from outside the home	4	0.1
Other loss of income	2	0.1
No material change in economic circumstances:	1,108	30.4
Transfer from other assistance	944	25.9
Alternate care placement	42	1.2
Institutionalized	45	1.2
Other	77	2.1

Because of available resources of the applicant, 464 (29.8 per cent) of all applicants were declared ineligible or rejected. Another 4.2 per cent were rejected because of ineligibility for reasons other than insufficient need, while 61.5 per cent were rejected for reasons other than eligibility.

Table 18. Applications Denied or Otherwise Rejected for Supplemental Nursing Care, by Reason for Rejection, July 1978-June 1979

Reason for Rejection	Number	Per Cent
All Applications Rejected	1,555	100.0
Ineligible because of sufficient income or resources	534	34.3
Available resources of applicant	464	29.8
Earnings of applicant and others in home	65	4.2
Receipt of Veterans Benefits, employer pension or other public assistance	5	0.3
Ineligible for reasons other than insufficient need	66	4.2
Failure to furnish necessary information or comply with agency policy	53	3.4
Admitted to institution	8	0.5
Disability requirements not established	5	0.3
Rejected for reasons other than points of eligibility given above	955	61.5
Voluntarily withdrew application	92	5.9
Died prior to approval	114	7.4
To receive another type of assistance	100	6.5
Moved out of state or could not be located	8	0.5
All other reasons	641	41.2

In Fiscal Year 1978-1979, there was a total of 3,075 closings. Death of the recipient (63.7 per cent) was the most common reason for closing. Another 22.9 per cent were closed for miscellaneous reasons, followed by 5.9 per cent closed because of decreased need.

Table 19. Number of Supplemental Nursing Care Cases Closed by Reason for Closing, July 1978-June 1979

Reason for Closing	Number	Per Cent
All Cases Closed	3,075	100.0
Death	1,960	63.7
Decreased need:		
Obtainment of employment or increased earnings by either recipient or others in household and other economic reasons*	181	5.9
Loss of eligibility for specified reasons other than decreased need:		
Admitted to institution	121	3.9
Moved out of state or could not be located	64	2.1
Voluntary request of discontinuance	40	1.3
All other reasons for loss of eligibility**	6	0.2
All other reasons including receipt of other types of aid	703	22.9

* Includes increased support from persons outside household, and other resources of recipients, spouse, and other persons in household, which lessened need.

** Transfer of property or cash to become eligible, and does not meet citizenship requirement.

SUPPLEMENTAL AID TO THE BLIND

Supplemental Aid to the Blind was initiated January 1, 1974. This program provides financial aid to needy blind persons over 18 who are unable to support themselves, who live in Missouri, who have less than $2,000 in personal property including cash, negotiable securities, and real property other than the home in which they live (or $4,000 if married and living with spouse) and who meet other requirements as set forth in law. Effective August 13, 1978 payments were raised from $135 to $160 per month; these payments cannot exceed that amount unless the claimant is in a practical nursing home, in which case the maximum payment is $200.

Table 20. Number of Recipients and Amount of Payments for Supplemental Aid to the Blind, July 1978-June 1979*

Month	Number of Recipients	Amount of Payments	
		Total	Average Per Recipient
TOTAL	XXXX	1,287,161	XXXX
1979			
June	837	115,185	137.62
May	814	111,862	137.42
April	814	111,781	137.32
March	812	111,610	137.45
February	808	110,973	137.34
January	817	112,493	137.69
1978			
December	811	111,803	137.86
November	797	110,119	138.17
October	792	109,139	137.80
September	776	106,712	137.52
August	760	86,372	113.65
July	780	89,112	114.25

* For data Prior to July 1978, see Appendix B, Tables V and VI and previous reports of the Division of Family Services.

Payments of $1,287,161 were made during Fiscal Year 1978-1979, the average payment per person being $133,83. In June 1979, there were 837 Supplemental Aid to the Blind recipients. There was a slight increase over June 1978, an increase of 33 recipients or 4.1 per cent.

Table 21. Applications for Supplemental Aid to the Blind Received, Disposed of, and Awaiting Disposition at End of Month, July 1978-June 1979*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month/
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	902	882	274	608	XXX
1979					
June	74	84	23	61	86
May	87	85	29	56	97
April	91	88	19	69	95
March	99	73	23	50	93
February	54	46	10	36	67
January	49	47	19	28	59
1978					
December	48	70	19	51	58
November	76	85	36	49	80
October	85	88	31	57	89
September	78	79	29	50	93
August	86	75	20	55	94
July	75	62	16	46	86

* For monthly data prior to July 1978, see Annual Report for Division of Family Services 1977-1978, p. 26.

** Includes such reasons as death, change of residence and voluntary withdrawal.

/ Figure does not always agree with number carried over as pending at first of following month due to adjustment in previous figures.

At the end of June 1979, 86 applications were awaiting disposition. A total of 902 applications were received during the year, 274 were approved for assistance and 608 were rejected.

Table 22. Cases Opened for Supplemental Aid to the Blind by Reason for Opening, July 1978-June 1979

Reason for Opening	Number	Per Cent
TOTAL	274	100.0
Change in economic circumstances because of:		
Loss of employment benefits to persons in home		
Illness or disablement	217	79.1
Lay-off, discharge or other reason	1	0.4
Resources exhausted	7	2.6
No material change in economic circumstances		
Transfer from other assistance	37	13.5
Other	12	4.4

As reported in Table 22, 217 cases or 79.1 per cent were opened during the year due to illness or disablement. The next largest reason for opening was transfer from other assistance with 37 openings (13.5 per cent of the total).

Table 23. Applications Rejected for Supplemental Aid to the Blind, by Reason for Rejection, July 1978-June 1979

Reason for Rejection	Number	Per Cent
All Applications Rejected	608	100.0
Ineligible because of sufficient income or resources	203	33.4
Available resources	109	17.9
Other income of applicant	94	15.5
Ineligible for reasons other than insufficient need	316	52.0
Vision in excess of statutory limitations	280	46.1
Failure to furnish necessary information	36	5.9
Rejected for reasons other than points of eligibility given above	89	14.6
Voluntarily withdrew application	45	7.3
Died prior to approval	4	0.7
Moved out of state or unable to locate	4	0.7
All other reasons	36	5.9

As indicated in Table 23, 608 applications were rejected during the year; 280 or 46.1 per cent were ineligible because they had vision in excess of the statutory limitations, whereas 109 or 17.9 per cent were ineligible because of available resources.

Table 24. Number of Supplemental Aid to the Blind Cases Closed by Reason for Closing, July 1978-June 1979

Reason for Closing	Number	Per Cent
All cases closed	264	100.0
Death	104	39.4
Decreased Need:		
Obtainment of employment or increased earnings by either recipient or others in household and other economic reasons	103	39.0
Loss of eligibility for specified reasons other than decreased need:		
Voluntary request of discontinuance	5	1.9
Could not be located	28	10.6
All other reasons for loss of eligibility*	7	2.7
All other reasons including receipt of other types of aid	17	6.4

* Includes such reasons as vision wholly or partially restored and refusal after acceptance to comply with agency policy.

In Fiscal Year 1978-1979, there was a total of 264 closings of Supplemental Aid to the Blind. The major reason for closing was death which was 104 cases or 39.4 per cent.

STATE SUPPLEMENTATION FOR ADULT RECIPIENTS

The Federal Supplementary Security Income (SSI) program established by the Social Security Amendments of 1972 became effective January 1,1974. Administered by the Social Security Administration, the Supplemental Security Income program was created to replace the Federal-State public assistance programs for the aged, blind and disabled. Subsequent amendments (P.L. 93-66 and P.L. 92-233) authorized the state to supplement the basic Federal Supplementary Security Income payment and required such supplementation in certain situations.

Under Federal law state supplementation is required in order to assure adult recipients on the public assistance rolls in December 1973 that they would not suffer any loss of income from their December 1973 income levels.

At the time of conversion to the SSI program, approximately 118,000 aged, blind, and disabled persons received assistance in December 1973. This group represented a "frozen group" of persons who were assured of continued benefits either fully or partially supplemented from state funds. Of the total, about 41,000 were found to be eligible for SSI without any state supplementation; 54,000 were found eligible for both SSI and state supplementation and the remaining 23,000 were found to be ineligible

for SSI and therefore were supplemented entirely from state funds. Since no new cases can be added to this group of supplemental cases, the number of these cases will decline steadily as cases are closed by death or other reasons.

Table 25. Number of Recipients and Amount of Payments for Adult Programs Converted to SSI-SP, July 1978-June 1979*

Month	Number of SSI-SP Recipients	Adult Program Recipients				Amount of Payments	
		OAA	PTD	AB	GR	Total	Average Per Recipient
TOTAL	XXXX	XXXX	XXXX	XXX	XXX	9,247,275	XXXX
1979							
June	24,153	20,267	3,074	772	40	733,007	30.35
May	24,339	20,429	3,092	777	41	738,304	30.33
April	24,604	20,665	3,117	781	41	745,674	30.31
March	24,925	20,947	3,151	784	43	755,563	30.31
February	25,136	21,125	3,173	795	43	762,795	30.35
January	25,381	21,375	3,163	799	44	769,104	30.30
1978							
December	25,624	21,602	3,171	807	44	775,136	30.25
November	25,887	21,835	3,194	813	45	782,864	30.24
October	26,147	22,071	3,211	819	46	790,509	30.23
September	26,424	22,300	3,247	831	46	799,313	30.25
August	26,719	22,563	3,272	835	49	792,030	29.64
July	27,057	22,827	3,322	856	52	802,976	29.68

* For data prior to July 1978, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

The supplemental cases consist of two groups; those that receive both SSI and state supplementation and those that receive state supplementation only. As indicated in Table 25, the SSI-SP group showed a total of 24,153 in June 1979, a decrease of 3,382 (12.3 per cent) from June 1979. There were 20,267 former old age recipients, 3,074 former recipients of the aid to disabled program; 772 former aid to the blind recipients; and 40 former general relief recipients. In June 1979, the average supplemental payment was $30.35 which was an increase of $0.73 from June 1978.

The second group of supplemental cases are those which are found to be ineligible for SSI and therefore supplemented entirely from state funds. As indicated in Table 26, there were 8,188 cases in June 1979. A total of 6,183 (75.5 per cent) were former old age assistance recipients. A total of 1,462 (17.9 per cent) had been aid to disabled recipients and 543 (6.6 per cent) were former recipients of aid to the blind. The total in June 1979 was a decrease of 979 (10.7 per cent) from June 1978. Total supplemental payments for this fiscal year were $4,882,143 averaging $47.38 per person per month.

Table 26. Number of Recipients and Amount of Payments for Adult Programs Converted to SP, July 1978-June 1979*

Month	Number of Recipients	Adult Program Recipients			Amount of Payments	
		OAA	PTD	AB	Total	Average Per Recipient
TOTAL	XXXX	XXXX	XXXX	XXXX	4,882,143	XXXX
1979						
June	8,188	6,183	1,462	543	390,325	47.67
May	8,241	6,210	1,480	551	393,498	47.75
April	8,336	6,279	1,495	562	397,878	47.73
March	8,392	6,334	1,497	561	399,996	47.66
February	8,458	6,390	1,506	562	403,462	47.70
January	8,516	6,437	1,514	565	406,141	47.69
1978						
December	8,599	6,505	1,527	567	410,021	47.68
November	8,675	6,565	1,539	571	413,059	47.61
October	8,771	6,636	1,555	580	417,464	47.60
September	8,855	6,712	1,559	584	422,570	47.72
August	8,940	6,783	1,572	585	412,149	46.10
July	9,070	6,896	1,593	581	415,580	45.82

* For data prior to July 1978, see Appendix B, Tables V and VI, and previous reports of the Division of Family Services.

FAIR HEARINGS AND APPEALS

Under provision of the Social Security Law an applicant or recipient of public assistance has the right to appeal any decision of a county family service office with whom he is aggrieved. An applicant may appeal based on the following reasons: denial of his application, discontinuance of payment, or the amount of benefit for which the applicant is determined to be eligible within 90 days from the date of such determination by the family services county office, and on the basis of unreasonable delay in action at any time. The appeal is from the decision of the county office to the Director of the Division of Family Services. A hearing is scheduled after an appeal is filed and the appeal is held in the county of the appellant's residence. A record of all testimony is made and preserved. It is on this basis that the Director of Family Services renders a decision, either reversing or upholding the action of the county family services office. A new appeal hearing procedure was introduced in March 1975, with all predetermination appeals to be state level hearings.

Table 27. Appeals and Fair Hearings, July 1, 1978-June 30, 1979

Item	Number
Total beginning of year	153
Number added during year	3,576
Total open during year	3,729
Total disposed of during year	3,515
Hearings held during year	1,881
Affirmed (Sustained)	1,453
Reversed	428
Withdrawn	686
Dismissed	948
Total pending end of year	214

A total of 3,576 appeals were filed in Fiscal Year 1978-1979. This was an increase of 720 or 25.2 per cent over the preceding fiscal year. There were only 153 cases carried forward from the preceding year making a total of 3,729 pending dispositions during the year. In Fiscal Year 1978-1979, a total of 3,515 appeals were disposed of; this was a decrease of 175 (4.7 per cent) from the previous fiscal year. Hearings were held in 1,881 appeals. The county office decision was affirmed or sustained in 1,453 cases or 77.2 per cent and reversed 428 times or 22.8 per cent. Of those cases disposed of without a hearing, 686 were withdrawn and 948 were dismissed. A total of 214 appeals were awaiting disposition at the close of the fiscal year.

FOOD STAMP PROGRAM

The Food Stamp Program is a nationwide program which helps low income families buy the foods they need for good health. The program is authorized by Congress, administered nationally by the United States Department of Agriculture's Food and Nutrition Services and is directed by State Welfare and their local offices. Administrative costs are shared by Federal and State governments.

Prior to January 1, 1979, the Food Stamp Program, as the result of the Food Stamp Act of 1964, enabled low income families to increase their food purchasing power by investing their own money in Federal food coupons (food stamps) which were worth more than the amount paid. The coupons were then spent like cash for food at retail stores. Any "food for human consumption" except alcoholic beverages could be purchased with the stamps. They could not purchase non-food items. Effective January 1,1979 the purchase requirement was eliminated.

Eligibility was determined on a household basis. To be eligible,such households were required to have cooking facilities, limited income (after deductions), and limited available resources. All able-bodied persons age 18 to 64 (including strikers) were required to register for work with the Missouri State Employment Services. Members of the household who were necessary to care for children under 18 or incapacitated adults were

exempt from work registration. Students who were enrolled at least half time, employed members of a household, teachers, professional and administrative personnel were also exempt from work registration. Households composed entirely of public assistance recipients were automatically eligible for food stamps.

On March 1, 1979, eligibility requirements of the Food Stamp Act of 1977, were implemented. In order to provide higher benefits to the households with the lowest income, the income maximums were lowered and are based on guidelines set by USDA which were higher than the Federal Poverty Guidelines set by the Office of Management and Budget. These figures are adjusted annually. The age requirement for work registration was changed to include household members between the ages of 18 and 60 instead of 65. Students who claim exempt status because of enrollment at least half time at any school, must now register for work when any school recess or vacation exceeds 30 days. The food stamp income and eligibility determinations are the same for all households regardless whether they are recipients of cash grant programs.

The Food Stamp Program differs from other income programs in that it is a hunger program based mainly on adjusted monthly income rather than a poverty program based on property maximum and need determination. Households are not required to adjust their standard of living in order to participate.

The Food Stamp Program began operation in the City of St. Louis in January 1963. In April 1970, a gradual expansion of the program began. By the end of 1973, 27 counties were participating, and as of June 30,1974 all counties were participating.

During the 1978-79 Fiscal Year, $97,175,455 in Food Stamps were distributed. Since the purchase requirement was eliminated January 1, 1979, of this amount $19,985,951 represents the amount of food stamps purchased and $77,189,504 represents the amount of bonus stamps received. On the average, bonus stamps amounted to 79.4 per cent of the total dollar value of stamps distributed. As shown in Table 29, the number of households participating increased from 63,533 in December 1978, to 92,307 in June 1979, an increase of 45 per cent. As of June 1979, there were 34,575 income maintenance households and 57,732 non-income maintenance households.

Table 28. Food Stamp Program, 1978-1979

Month	Total		Income Maintenance		Non-Income Maintenance		Total Dollar Value of Stamps	Value of Bonus Coupons
	Households	Persons	Households	Persons	Households	Persons		
TOTAL	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX	97,175,455	77,189,504
1979								
June	92,307	264,244	34,575	115,433	57,732	148,811	8,029,146	8,029,146
May	91,750	264,564	34,224	114,862	57,526	149,702	7,986,394	7,986,394
April	90,511	263,911	33,829	113,888	56,682	150,023	7,960,192	7,960,192
March	88,593	262,492	33,241	112,244	55,352	150,248	7,794,754	7,794,754
February	79,184	240,529	31,583	108,017	47,601	132,512	7,102,857	7,102,823
January	73,407	222,640	30,523	104,573	42,884	118,067	6,668,639	6,646,007
1978								
December	63,533	190,655	27,980	96,158	35,553	94,497	8,593,956	5,295,005
November	63,377	189,794	28,224	97,236	35,153	92,558	8,635,086	5,249,025
October	63,236	189,432	28,200	97,085	35,036	92,347	8,560,561	5,204,551
September	62,905	188,846	28,102	96,947	34,803	91,899	8,506,817	5,179,432
August	63,876	192,538	28,347	98,084	35,529	94,454	8,694,003	5,319,120
July	63,385	191,366	28,210	97,668	35,175	93,698	8,643,050	5,423,055

PART IV

MEDICAL SERVICES

Missouri's medical assistance program became effective on October 13, 1967, as a result of legislation (SB 53) enacted by the Seventy-fourth General Assembly. This program, popularly called "Medicaid" was established under the provisions of Title XIX of the 1965 Amendments to the Federal Social Security Act. The Missouri program provides the following medical services to recipients of public assistance and certain other eligible persons.

(1) Physicians' Services
(2) Inpatient Hospital Services
(3) Prescription Drugs
(4) Dental Services
(5) Skilled Nursing Home Services
(6) Intermediate Care Facilities
(7) Outpatient Hospital Services
(8) X-ray and Laboratory Services
(9) Medicare Supplementary Medical Insurance "Buy In"
(10) Payments on Behalf of Aged Recipients in Public Mental and Tuberculosis Hospitals
(11) Early and Periodic Screening, Diagnosis, and Treatment of Recipients Under Age 21
(12) Home Health Care Service
(13) Emergency Ambulance Service
(14) Optometric Services
(15) Family Planning
(16) Voluntary Sterilization Service
(17) Intermediate Care Facilities for the Mentally Retarded and Related Conditions
(18) Durable Medical Equipment

Effective July 1, 1978, orthopedic devices and other prosthetics including eye glasses, dentures, hearing aids, and wheel chairs were made available to all eligible persons.

In addition to the above services, which are available to all public assistance recipients and certain other eligible persons, the Missouri Division of Family Services pays the Supplementary Medical Insurance Premium under the Medicare Program (Title XVIIIB) for all cash and Supplementary Security Income Payment recipients (except Blind Pension and General Relief) 65 years of age and over and under 65 who have received Social Security Disability Insurance for more than two years. This premium was $8.20 per person per month during the current fiscal year.

Under the Medicare program, deductible and coinsurance costs must be paid by either the individual or someone in his behalf. These deductibles and coinsurance charges are paid by the Missouri Division of Family Services on Medicaid covered services for all public assistance recipients who also have Medicare coverage. Missouri's medical services program can be described as state administered and state operated. The Missouri Division of Family Services is directly responsible for the processing and payment of medical claims. However, if a service is covered by Supplementary Medical Insurance, under the Social Security Administration, the bill is first processed by a Social Security Administration intermediary and is then forwarded to the Division of Family Services for the payment of the deductible and coinsurance costs. The Missouri medical program is a vendor program with payments made only to the provider of the service. Each recipient receives a monthly identification card which he presents to the provider of medical services. The provider then bills the Division of Family Services directly for payment for the care of a Medicaid only person.

Table 29. Medical Expenditures by Service and by Program, July 1978 - June 1979

Services	Total All Programs	Program						
		Aged	Aid to Dependent Children	Disabled	General Relief	Blind	Blind Pension	Child Welfare Services Foster Care
TOTAL	233,771,258*	91,863,277	64,829,131	65,485,931	7,487,291	2,686,235	184,084	1,235,309
Physicians' Services	21,719,456	4,418,955	11,574,591	4,354,292	900,832	211,891	19,277	239,618
Drugs	20,898,288	9,884,721	4,221,906	5,908,355	433,024	367,585	37,750	44,947
Dental Services	7,962,714	912,774	5,447,392	1,226,395	189,712	55,488	5,474	125,479
Inpatient Hospital	71,606,532	5,578,669	38,423,293	20,747,194	5,606,417	501,223	28,226	721,510
Outpatient Hospital	6,255,342	841,415	3,794,844	1,288,651	190,457	60,533	3,814	75,628
Intermediate Care Facility	69,129,212	56,984,038		10,857,031	23,749	1,181,135	83,259	
Skilled Nursing Care	1,723,677	1,282,723		414,433	6,356	17,161	3,004	
X-ray and Laboratory	287,569	91,582	130,695	56,337	4,776	2,153	438	1,588
Ambulance Service	307,124	140,399	68,776	79,488	10,665	5,961	598	1,237
Home Health Services	534,375	96,362	40,270	350,560	28,493	17,659	1,031	
Optometric Services	2,370,273	639,416	1,107,358	496,577	87,925	13,238	457	25,302
TB Hospital	96,956	33,965	11,524	45,502	4,885	324	756	
Mental Hospital	5,734,781	5,001,652		670,983		62,146		
Buy In	6,462,859	4,999,988	8,482	1,264,651		189,738		
Intermediate Care Facility-Mentally Retarded	18,682,100	956,618		17,725,482				

* Payments for Mental Hospital and ICF-MR include payments made by Mental Health as well as Family Services.

In the Missouri Medical Assistance program, the Division of Family Services requires a provider of services to sign an agreement of participation before services are rendered to public assistance recipients, if a provider is to be paid for those services. The agreement requires the provider to accept the Division of Family Services payment as full and final. Providers are not permitted to collect a partial fee from the recipient or his family as well as from the Division of Family Services.

A total of $233,771,258 was expended during the 1978-79 fiscal year for medical services (Table 29). This was an increase of about $29.5 million (14.4 per cent) from the prior fiscal year. This $233.8 million figure represents the dollar expenditures during the 12-month period July 1, 1978 to June 30, 1979. This will differ from the appropriated amount, which is based on services rendered during the 12-month period but which may actually be paid after the end of the fiscal year and are not reflected in this figure.

Of the $233.8 million expended for medical services during the fiscal year $64.8 million or 27.7 per cent was spent for recipients of Aid to Families with Dependent Children (AFDC), $91.9 million or 39.2 per cent was for aged recipients, $65.5 million or 28.0 per cent was for persons receiving disabled benefits, $7.5 million or 3.2 per cent for General Relief recipients, $2.9 million or 1.2 per cent for persons receiving Aid to the Blind or Blind Pension benefits, and $1.2 million or 0.5 per cent for Child Welfare Services - Foster Care.

A total of 356,427 different individuals received one or more medical services at least one time during the year. The monthly expenditures and number of recipients of one or more services during the year are given below.

Month	Expenditures*	Individuals*
1979		
June	18,681,993	137,695
May	18,824,136	148,085
April	21,117,913	159,131
March	14,139,525	136,001
February	20,270,930	158,550
January	16,561,455	150,057
1978		
December	14,633,910	139,472
November	16,577,310	149,100
October	16,103,270	153,852
September	15,232,031	147,093
August	15,867,229	152,274
July	14,784,860	150,861

*Expenditures and individual totals do not include payments or persons in Mental and TB hospitals, ICF-MR and Buy In.

The overall cost per user was $603.46 per year ($50.29 per month), an increase of $144.79 per user per year ($12.07 per month) compared with the prior fiscal year.

The range by program in costs per person per month was from a low of $19.52 for Child Welfare Services to a high of $104.91 for the aged.

Type of Assistance	Average Cost Per User Per Year	Average Cost Per User Per Month
Overall average	603.46	50.29
Aged	1,258.92	104.91
Aid to Families with Dependent Children	288.01	24.00
Disabled	1,138.51	94.88
Blind	928.85	77.40
General Relief	864.58	72.05
Blind Pension	532.03	44.34
Child Welfare Services-Foster Care	234.18	19.52

Note: The overall average and average cost for the aged and disabled are exclusive of payments for the Mentally Retarded in Intermediate Care Facilities.

PHYSICIANS' SERVICES

As of June 1979, a total of 12,876 physicians in Missouri and adjoining states were signed up to participate in the Medical Assistance program.

During the fiscal year a total of 267,424 different persons received physicians' services at a total cost of $21,719,456. This was a 9.6 per cent decrease in number of persons receiving services, and an increase of $567,207 (2.7 per cent) compared with the previous fiscal year. Payments for physicians' services represented 9.3 per cent of total medical costs incurred during the fiscal year. The average monthly number of persons served was 67,431, and the average cost per person per month was $26.84. Compared with the preceding fiscal year, the average monthly number of persons decreased by 5,032 (6.9 per cent), and the average cost per person per month increased by $2.51(10.3 per cent).

Of the 267,424 users of physicians' services, the largest group was AFDC recipients, totaling 62 per cent (166,460) of all persons receiving

physicians' services. The next largest group was the aged, numbering 57,123 or 21.4 per cent of the total. These data are given by program in Table 30.

Table 30. Number of Recipients Receiving Physicians' Services by Assistance Program, July 1978 - June 1979

Program	Number of Different Persons Served During the Year	Average Number of Persons Served Per Month	Total Cost	Average Cost Per Person Per Month
TOTAL	267,424	67,431	21,719,456	26.84
Aged	57,123	19,996	4,418,955	18.42
Aid to Dependent Children	166,460	34,014	11,574,591	28.36
Disabled	31,424	10,602	4,354,292	34.23
General Relief	6,153	1,353	900,832	55.48
Blind	2,254	731	211,891	24.16
Blind Pension	252	73	19,277	22.01
Child Welfare Services-Foster Care	3,758	662	239,618	30.16

Payments for physicians' services were made directly to the physician by the Division of Family Services for services rendered to recipients who do not also have Medicare coverage. Physicians' services for persons under both Medicare and Medicaid were paid by a combination of Supplementary Medical Insurance (Title XVIIIB of the Social Security Act) and direct payment to the physician of the deductible and coinsurance by the Division of Family Services. During the fiscal year, a total of $5,656,633 was paid in deductible and coinsurance for persons under both Medicare and Medicaid coverage. This was an increase of $743,816 (15.1 per cent) over the preceding fiscal year, when there was a decrease from 1976-77. The 1978-79 figure is an increase of only 10.5 per cent from 1976-77.

For persons without XVIIIB coverage, the major subitems of expenditures in physicians' services were as follows:

	Average User Per Month	Total Annual Cost	Per Cent of Total Cost	Average Cost Per User Per Month
Total cost		18,921,255	100.0	
Office visits	27,965	3,767,182	19.9	11.23
Hospital visits	1,943	445,571	2.4	19.11
Surgery	1,145	1,689,893	8.9	122.99
Radiology	2,701	647,687	3.4	19.98
Obstetrics & Gynecology	999	2,283,780	12.1	190.51
Injections	2,644	180,606	1.0	5.69
All other		9,906,536	52.3	

These totals include physicians' services provided under other separately discussed programs such as family planning and EPSDT.

INPATIENT HOSPITAL SERVICES

As of June 1979 there were 1,343 hospitals in Missouri and outside the state participating in the hospital care program. This was an increase of 173 hospitals over last year, mostly out of state. (The total count is inflated by inclusion of now-inactive providers enrolled over a period of several years; this is to be remedied in the 1979-80 fiscal year.)

Under this program medically necessary inpatient hospital care is purchased for up to 21 days per admission. For persons covered by Medicare Hospital Insurance, the Division of Family Services pays directly to the hospital the deductible and coinsurance charges up to the limitations in effect. During the 1978-79 fiscal year, these changes were made effective January 1, 1979: the inpatient hospital deductible was raised from $140 to $160 per benefit period; the inpatient hospital coinsurance was raised from $36 to $40 per day, and the coinsurance lifetime reserve was raised from $72 to $80 per day. If hospitalization is medically necessary after these insurance benefits are exhausted, the Title XIX medical program will make the hospital payment for a maximum of 21 days of care per admission. For all recipients not eligible for Medicare benefits, the Division of Family Services makes reasonable cost payments directly to the hospitals.

During the 1978-79 fiscal year, a total of 74,975 persons was admitted a total of 99,599 times, representing 738,837 days of hospital care. The average number of days per admission for Medicare - Medicaid recipients was 11.2; for Medicaid-only individuals it was 6.2 days. By program, the average number of days per admission was largest for the aged (11.2), followed by the blind and disabled. AFDC and CWS-Foster Care had the lowest number of days per admission. Readmission rates ranged from 1.77 for the disabled to 1.19 for CWS-Foster Care. Total hospital payments amounted to $71,606,532, and the average payment per admission was $718.95. These data are shown in Table 31.

Table 31. Number of Recipients Receiving Inpatient Hospital Services by Assistance Program, July 1978 - June 1979

Program	Unduplicated Persons	Number of Admissions	Readmission Rate	Total Days Paid	Average Days Per Admission	Total Payments	Average Payment Per Admission
TOTAL	74,975	99,599	1.33	738,837	7.4	71,606,532	718.95
Aged	20,232	24,610	1.22	274,536	11.2	5,578,669	226.68
Aid to Dependent Children	38,692	48,295	1.25	230,238	4.8	38,423,293	795.60
Disabled	11,443	20,265	1.77	184,349	9.1	20,747,194	1,023.79
General Relief	3,057	4,375	1.43	33,330	7.6	5,606,417	1,281.47
Blind	810	1,170	1.44	11,059	9.5	501.223	428.40
Blind Pension	85	103	1.21	1,004	9.7	28,226	274.04
Child Welfare Services-Foster Care	656	781	1.19	4,321	5.5	721,510	923.83

Compared to the previous fiscal year, the number of unduplicated persons showed a decrease of 5,196 (6.5 per cent); the number of admissions decreased 3,645 (3.5 per cent); and total days paid showed a decrease of 17,898 (2.4 per cent). However, the total payments increased by $8,421,506 (13.3 per cent), and the average hospital stay increased from 7.3 to 7.4 days (1.4 per cent).

The average payment per admission of $718.95 in 1978-79 was an increase of $106.95 from the prior fiscal year, or about 17.5 per cent. It should be pointed out that this average payment includes hospital care for persons also under Medicare coverage for whom the Division of Family Services pays only the coinsurance and deductible costs and blood charges. Partial adjustment for this group can be made by excluding aged and blind recipients, giving an average of $888.52 per admission. The average for those two groups was $235.99.

PRESCRIPTION DRUGS

As of June 1979, there were 1,275 pharmacies and dispensing physicians participating in the drug program. During the 1978-79 fiscal year 3,568,095 prescriptions were filled at a cost of $20,898,288 or an average prescription cost of $5.86. A total of 244,878 unduplicated persons received one or more prescriptions during the year with a monthly average of 95,255 persons receiving prescriptions.

Compared with the prior fiscal year, the number of persons served decreased 28,499 (10.4 per cent), and the number of prescriptions filled decreased 146,460 (3.9 per cent). Nevertheless, there was an increase of $479,739 (2.3 per cent) in the total payment for drugs. This reflects a 36-cent (6.5 per cent) increase in payment per prescription as well as a 7.2 per cent increase in prescriptions per unduplicated person to 14.6.

Table 32. Number of Recipients Receiving Prescription Drugs by Assistance Program, July 1978 - June 1979

Program	Unduplicated Persons	Average Number of Persons Per Month	Number of Prescriptions	Total Payments	Average Payment Per Rx	Average Cost Per Person Per Year
TOTAL	244,878	95,255	3,568,095	20,898,288	5.86	85.34
Aged	61,052	37,901	1,675,540	9,884,721	5.90	161.91
Aid to Dependent Children	138,779	33,811	822,037	4,221,906	5.14	30.42
Disabled	34,703	19,833	923,926	5,908,355	6.39	170.25
General Relief	5,291	1,708	70,406	433,024	6.15	81.84
Blind	2,414	1,414	61,308	367,585	6.00	152.27
Blind Pension	276	147	5,922	37,750	6.37	136.78
Child Welfare Services-Foster Care	2,363	441	8,956	44,947	5.02	19.02

When distributed by program, the largest number of prescriptions and the largest total drug payments were required by the aged, while the disabled showed the largest average payment per prescription and the largest average cost per person per year. The aged received 47.0 per cent of the prescriptions (47.3 per cent of the payments); the disabled received 25.9 per cent of the prescriptions (28.3 per cent of the payments); and AFDC recipients received 23.0 per cent of the prescriptions (20.2 per cent of the payments). The Blind and General Relief and Child Welfare Services clients received the remaining slightly more than 4 per cent of prescriptions and of payments. These data, by program, are given in Table 32.

DENTAL SERVICES

As of June 1979, there were 1,483 dentists participating in the dental program.

During the fiscal year, 80,955 recipients were served at a total cost of $7,962,714 for a cost per person of $98.36. The number of persons utilizing dental services decreased by 802 (1.0 per cent), but total costs increased by $2,417,592 (43.6 per cent). Average payment per person per year increased 45.0 per cent. One factor contributing to this increase was Senate Bill 334, which at the beginning of this fiscal year expanded Medicaid dental services to include dentures for persons 21 years and over, with payments retroactive to May 1, 1978.

Table 33. Number of Recipients Receiving Dental Services by Assistance Programs, July 1978 - June 1979

Program	Unduplicated Persons	Average Number of Persons Per Month	Total Payments	Average Payment Per Person Per Year
TOTAL	80,955	10,030	7,962,714	98.36
Aged	7,251	687	912,774	125.88
Aid to Dependent Children	63,542	7,908	5,447,392	85.73
Disabled	6,653	1,014	1,226,395	184.34
General Relief	1,299	162	189,712	146.04
Blind	378	50	55,488	146.79
Blind Pension	33	4	5,474	165.88
Child Welfare Services-Foster Care	1,799	205	125,479	69.75

SKILLED NURSING FACILITIES

As of June 1979 there were 209 nursing homes participating in Missouri's nursing home program, of which 8 were skilled nursing facilities only, 128 were intermediate care facilities only, and 73 were both skilled and intermediate nursing care facilities. Skilled nursing care services are provided only to recipients 21 years of age and over who are certified by Division of Family Services physicians as needing this type of care.

During the 1978-79 fiscal year 981 different persons received skilled nursing home care at a total cost of $1,723,677. The average per diem cost to the program was $18.37. The average monthly number of nursing home patients was 236. Skilled nursing home expenditures represented approximately 0.7 per cent (0.9 per cent last year) of total expenditures for medical services during the fiscal year. Of the 981 persons receiving skilled nursing care, the aged and disabled accounted for 98.1 per cent (80.5 and 17.6, respectively); general relief and blind persons accounted for the remainder.

Table 34. Number of Persons Receiving Skilled Nursing Home Services and Expenditures, by Program, July 1978 - June 1979

Program	Unduplicated Persons	Total Days Paid	Average Days Per Person Per Year	Total Cost	Average Number of Persons Per Month	Average Cost Per Day
TOTAL	981	93,813	96	1,723,677	236	18.37
Aged	790	71,547	91	1,282,723	185	17.93
Disabled	173	20,901	121	414,433	47	19.83
General Relief	4	291	73	6,356	1	21.84
Blind	12	940	78	17,161	2	18.26
Blind Pension	2	134	67	3,004	1	22.42

Compared with the previous fiscal year, total costs showed a decrease of $172,623 (9.1 per cent), but the number of unduplicated persons receiving care increased by 453 (85.8 per cent). The average monthly number of patients decreased by 81 (25.6 per cent), but the average per diem cost increased by $2.82 (18.1 per cent) to $18.37. The average number of days per person per year was 96 -- well under half the previous year's figure of 231 days. Increased emphasis on use of intermediate care facilities may account for much of this drop.

INTERMEDIATE CARE FACILITIES (ICF)

This program, begun in 1974, provides vendor payments for nursing care when an individual is in need of more skilled care than is offered by practical nursing homes but does not quite require skilled nursing home care. Effective October 1975, the minimum age requirement for these services was 18 years.

A total of 15,921 individuals received services in intermediate care facilities during the 1978-79 fiscal year, with an average of 10,401 persons receiving ICF services each month. These figures represent an increase of 975 (6.5 per cent) total unduplicated persons and a 16.1 per cent increase of 1,441 persons per month. The total expenditure for the year was $69,129,212 (up 28.6 per cent) for an average program cost of $17.10 per day.

Table 35. Number of Persons Receiving Services in Intermediate Care Facilities, and Expenditures, by Program, July 1978 - June 1979

Program	Unduplicated Persons	Total Days Paid	Average Days Per Person Per Year	Total Cost	Average Number of Persons Per Month	Average Cos Per Day
TOTAL	15,921	4,043,475	254	69,129,212	10,401	17.10
Aged	9,960	3,376,560	339	56,984,038	8,675	16.88
Disabled	5,670	595,670	105	10,857,031	1,541	18.23
General Relief	11	1,206	110	23,749	3	19.69
Blind	250	64,219	257	1,181,135	168	18.39
Blind Pension	30	5,820	194	83,259	14	14.31

Note: Totals exclusive of persons and payments for mentally retarded in Intermediate Care Facilities.

Of the average number of persons (10,401) in intermediate care facilities each month 8,675 or 83.4 per cent were aged; 1,541 or 14.8 per cent were disabled; 182 or 1.7 per cent were recipients of Blind Pension or Aid to the Blind; and 3 or 0.03 per cent were General Relief recipients. The average number of days per person per year was 254 (up 7.2 per cent).

OUTPATIENT HOSPITAL SERVICES

Many different services are provided in hospital outpatient facilities, but approximately 85 per cent of total services rendered can be classified as radiology. As of June 1979, a total of 963 hospitals, including 799 outside the state, participated in the outpatient hospital care program.

The unduplicated number of individuals served during fiscal year 1978-79 was 126,833. The total cost for outpatient services was $6,255,342. The average cost per patient was $21.69. Compared with the prior fiscal year, total costs decreased by $39,369 (0.6 per cent), and individuals served decreased by 26,664 (17.4 per cent), but the average cost per person per month increased by $2.19 (11.2 per cent).

Table 36. Number of Persons and Expenditures for Outpatient Hospital Services, July 1978 - June 1979

Program	Unduplicated Persons	Total Payments	Average Number of Persons Per Month	Average Cost Per Person Per Month
TOTAL	126,833	6,255,342	24,029	21.69
Aged	19,649	841,415	3,245	21.61
Aid to Dependent Children	90,288	3,794,844	16,191	19.53
Disabled	11,186	1,288,651	3,483	30.83
General Relief	2,906	190,457	641	24.76
Blind	924	60,533	160	31.53
Blind Pension	104	3,814	15	21.19
Child Welfare Services-Foster Care	1,776	75,628	294	21.44

X-RAY AND LABORATORY SERVICES

X-ray and laboratory services providers are specialized facilities designed to conduct only outpatient laboratory and radiological tests. Services provided in the outpatient department of a hospital or in a physician's office are not included in these statistics but are included in outpatient hospital and physicians' services statistics. As of June 1979, there were 99 independent clinical laboratories participating in the X-ray and laboratory services program.

A total of 22,379 different individuals (up 82 per cent) received the services at a total cost of $287,569 or an average user cost of $12.85 (down 14.3 per cent).

MEDICARE SUPPLEMENTARY MEDICAL INSURANCE "BUY IN"

Beginning in July 1973 Medicare was expanded to include not only those over 65 years of age, but also those under 65 who have received Social Security Disability Insurance for more than two years. The Division of Family Services pays the Supplementary Medical Insurance premium for all cash recipients who meet their criteria, as well as medical assistance or vendor only recipients who receive Supplementary Security Income payments and those adult cases converted to Supplementary Security Income on January 1, 1974. However, General Relief and Blind Pension recipients are excluded because they are entirely state funded and federal regulations limit "Buy In" to recipients of federally matched assistance programs.

The total expenditures for the 1978-79 fiscal year were $6,462,859 which provided Supplementary Medical Insurance for 65,482 recipients. This was an increase of $36,438 (0.6 per cent) in cost and a decrease of 4,817 (6.9 per cent) in the average number of persons being served per month. The decrease in persons was due primarily to the declining caseload in the adult supplementation programs.

PAYMENTS ON BEHALF OF AGED RECIPIENTS IN PUBLIC MENTAL AND TUBERCULOSIS HOSPITALS

A part of Title XIX of the Social Security Act provides that a state may pay for medical services provided to eligible individuals age 65 and over in public mental and tuberculosis hospitals. This has resulted in payments from the Division of Family Services to the Department of Mental Health and to the State Chest Hospital for medical services. The benefits to the state come from federal matching funds made available through Title XIX to the Division of Family Services which, in turn, makes payments for medical services to the Department of Mental Health and the State Chest Hospital.

A total of 753 different recipients was cared for in the five state mental hospitals at an average cost of $7,616 per patient. A total of $5,734,781 was paid to the Department of Mental Health during the fiscal year.

An average of 16 recipients was cared for each month in the State Chest Hospital at Mount Vernon, at an average cost per month of $504.98 (up 74 per cent). A total of $96,956 was paid to the State Chest Hospital.

EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT OF RECIPIENTS UNDER AGE 21

As of February 7, 1972, Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) was provided as a method of screening children under age 21. EPSDT is an attempt to locate potential and existing health problems in children and young adults. Effective January 1973 EPSDT became available to the following persons in addition to AFDC children and payees under age 21: GR recipients under age 21, Supplemental AB recipients under age 21, BP recipients under age 21, Supplemental NC recipients under age 21, MA recipients under age 21. An annual diagnostic examination is offered to this group of recipients at the time of the regular reinvestigations or approvals; however, acceptance of this service is voluntary. If a health problem is found, referral is made to the service worker for follow-up.

The total number of persons screened during fiscal year 1978-79 was 33,556, of which 20,241 were ages 6 to 20 and 13,315 were under age 6. Of the total individuals screened, 4,322 (12.9 per cent) were referred for diagnosis and treatment.

Total payments for screening services for the year were $493,680, of which $206,185 (41.8 per cent) was for children under age 6. There were payments of $454,980 for physicians' services and $38,700 for outpatient hospital services.

HOME HEALTH CARE SERVICES

In addition to the services of physicians, dentists, physical therapists, and other services and items available to patients in their homes, home health care services are provided for public assistance recipients age 21 or over and to needy eligible relatives age 21 or over caring for dependent children. The patient must require skilled nursing services similar to those provided in a licensed skilled nursing home. Medicare benefits must be exhausted before the person is eligible for home health care services through Title XIX. There were 47 participating home health agencies in June 1979.

During the 1978-79 fiscal year home health care services were provided to 2,193 persons (up 50.3 per cent) at a total cost of $534,375. This was an average user cost of $243.67 (up 17.9 per cent). This program accounted for less than 0.3 per cent of the cost of medical services.

EMERGENCY AMBULANCE SERVICE

Emergency ambulance service is provided if the attending physician certifies that the service is medically necessary. By June 1979, 300 ambulance services were participating in this program.

During the 1978-79 fiscal year, 11,633 persons received emergency ambulance service at a total cost of $307,124. Average user cost was $26.40, a decrease of 12.3 per cent from last year's $30.11.

OPTOMETRIC SERVICES

The 76th General Assembly added optometric services to those provided under Title XIX. Effective October 1972, annual visual examinations are covered up to $12. As of November 1, 1973 glasses for persons under 21 years of age were added. This fiscal year, Senate Bill 334 extended Medicaid coverage to include eyeglasses (meeting certain standards of correction) and optometric services to recipients age 21 and over. One pair of glasses per year is allowed per recipient under 21, and one pair per 3 years for those 21 and over. A distinction has been established between limited and complete eye examinations. Payment is provided for customary and usual costs up to $12 for limited and $22 for complete examinations.

The 79th General Assembly provided for direct payment to participating providers for artificial eyes and related services for Title XIX eligible public assistance recipients effective July 1, 1978 with payments retroactive to May 1, 1978. Stock eyes are covered up to a maximum allowable of $100, custom eyes to $255, refitting to $60 and

cleaning, polishing and checking up to $10. As of June 1979, there were 472 opticians, 171 providers of eyeglasses, and 30 providers of artificial eyes participating in this program.

A total of 44,098 persons received optometric services during the 1978-79 Fiscal Year at a cost of $2,370,273, an average of $53.75 per user. Eyeglasses accounted for about 71 per cent of the total. Of that expense, in turn, persons over 21 accounted for 77.3 per cent. Because of the addition of that program, total figures are not comparable with last year's. Cost of eyeglasses for persons under 21 increased 8.5 per cent from last year.

FAMILY PLANNING

Public Law 92-603, effective October 30, 1972, requires that family planning services be offered to all appropriate clients. Payments for these services can be made under Title XIX for the cost of visits to a physician, inpatient hospital or outpatient hospital clinic and for birth control pills and other prescriptions. Any person is free to accept or reject a referral for such services, and the decision does not affect the receipt of assistance or other services from the Division of Family Services. No caseworker is required to furnish information or referral for family planning if to do so is contrary to the worker's beliefs; the claimant wishing the information or service is to be referred to another worker.

Family planning services were provided to 23,111 different persons (down 26.8 per cent) during the fiscal year at a total cost of $805,430 (down 30.1 per cent). Physicians' services cost $379,461 (47.1 per cent of the total). Drug expenditures were $354,318 (44.0 per cent); inpatient hospital expenses were $57,484 (7.1 per cent); and outpatient hospital expenses were $14,167 (1.8 per cent). About 90 per cent of those receiving family planning services were AFDC recipients.

VOLUNTARY STERILIZATION SERVICES

Sterilization services under the Title XIX program were begun late in Fiscal Year 1975-76. There continues to be a prohibition against the sterilization of persons who have been judically declared mentally incompetent and also for minors. Effective March 8, 1979, the Department of Health, Education and Welfare tightened guidelines limiting circumstances under which payments for sterilization can be made, including requiring that the patient sign a consent form 30 days prior to the procedure (72 hours in cases of premature delivery or emergency abdominal surgery).

During Fiscal Year 1978-79, 1,408 sterilizations were performed at a total cost of $499,862.

INTERMEDIATE CARE FACILITIES FOR THE MENTALLY RETARDED

Late in Fiscal Year 1975-76 provision was made for recipients age 18 and over who are mentally retarded or have related conditions residing in intermediate care facilities for the mentally retarded be included under Title XIX. Related conditions include epilepsy, cerebral palsy and other developmental disabilities.

A total of 1,569 different persons (a monthly average of 1,186) received ICF-MR care at a total cost of $18,682,100 during Fiscal Year 1978-79.

DURABLE MEDICAL EQUIPMENT

The 79th General Assembly enacted legislation which permits direct payment to participating Durable Medical Equipment providers for services to Title XIX eligible public assistance recipients effective July 1, 1978 with payment retroactive to May 1, 1978. Covered services include purchase or rental of or economically feasible repairs to wheelchairs, walkers, braces, artificial limbs, breast prostheses, hearing aids, and artificial larynxes. Items covered under Title XVIII Medicare such as bedpans, hospital beds, crutches, and canes are not included under DME.

Since wheelchairs and walkers are included in the per diem rate Medicaid pays to skilled or intermediate nursing facilities and to hospitals, patients in those institutions are not covered for those items.

A total of 270 persons benefited from this service during Fiscal Year 1978-79 at a total cost of $45,239, an average of $167.55 per user.

MEDICAL ASSISTANCE

Effective January 1, 1974, claimants could apply for medical assistance if they were ineligible for any other of the state supplemental programs, or categorical programs. (Persons eligible for these programs are automatically eligible for medical assistance.) These claimants would not only have to meet requirements in effect January 1, 1972 for the former aged, disabled, and aid to the blind programs, but also would have to qualify under specified adjusted gross income requirements. If a claimant's adjusted gross income was less than set out in the Social Security Act, as amended, and other eligibility factors are met, he would

be eligible for medical assistance. However, if he is eligible with reference to other requirements but not eligible on the basis of income, a special "spenddown" procedure is required. Briefly, this procedure requires computing the amount a claimant must spend for medical expenses from his own income in a quarter. If this amount is greater than the amount it is determined he can afford from his current income, his eligibility for medical assistance is established for the remainder of the quarter.

Table 37. Applications for Medical Assistance Received, Disposed of, and Awaiting Disposition at End of Month, July 1978-June 1979*

Month	Number of Applications Received	Applications Disposed of			Number of Applications Awaiting Disposition at End of Month/
		Total	Number Approved for Assistance	Number Denied or Disposed of for Other Reasons**	
TOTAL	38,924	38,076	22,920	15,156	XXXX
1979					
June	3,422	2,960	1,785	1,175	3,889
May	3,272	3,367	1,997	1,370	3,437
April	3,414	3,511	2,176	1,335	3,556
March	3,927	3,759	2,321	1,438	3,647
February	3,088	2,642	1,564	1,078	3,513
January	2,988	3,058	1,848	1,210	3,079
1978					
December	2,788	2,826	1,701	1,125	3,162
November	2,862	2,964	1,751	1,213	3,205
October	3,310	3,313	1,961	1,352	3,312
September	3,136	3,225	1,948	1,277	3,320
August	3,413	3,278	1,980	1,298	3,415
July	3,304	3,173	1,888	1,285	3,288

* For monthly data prior to July 1978, see Annual Report for Division of Family Services, 1977-1978, p. 46.

** Includes such reasons as death, change of residence, and voluntary withdrawal.

/ Figure does not always agree with number carried over as pending at first of following month due to adjustment in previous figures.

During fiscal year 1978-79, applications received totaled 38,924 (up 15.9 per cent from last year). Of these plus the 3,164 applications pending July 1, 1978, 38,076 were disposed of, and 3,889 awaited disposition as of July 1, 1979. Of those disposed of, 22,920 (60.2 per cent) were approved, and the remaining 15,156 were denied or otherwise disposed of.

Table 38. Cases Opened for Medical Assistance by Reason for Opening, July 1978-June 1979

Reason for Opening	Number	Per Cent
TOTAL	22,920	100.0
Change in economic circumstances because of:	21,501	93.8
Loss of employment benefits to persons in home		
Illness or disablement	15,874	69.2
Lay-off, discharge, or other reason	145	0.6
Resources exhausted	5,398	23.6
Loss of a wage earner in home by death	48	0.2
Other loss of income	36	0.2
No material change in economic circumstances:	1,419	6.2
Institutionalized	53	0.2
Transfer from other assistance	125	0.5
Other	1,241	5.5

Nearly seven-tenths (69.2 per cent) of all openings were due to loss of employment because of illness or disablement. The next most frequent reason for opening was exhaustion of resources, which accounted for 23.6 per cent of all openings.

Not quite 30 per cent (29.6) of applicants rejected were ineligible because of sufficient income or resources. The remainder were scattered among a variety of reasons (Table 39), principally failure to establish that disability requirements were met, voluntary withdrawal of application, and failure to furnish necessary information or comply with agency policy.

Table 39. Applications Denied or Otherwise Rejected for Medical Assistance, by Reason for Rejection, July 1978-June 1979

Reason for Rejection	Number	Per Cent
All Applications Rejected	15,156	100.0
Ineligible because of sufficient income or resources	4,483	29.6
Available resources of applicant	3,155	20.9
Employment or earnings of applicant and others in home	1,169	7.7
Receipt of Veterans Benefits, employer pension or other public assistance	159	1.0
Ineligible for reasons other than insufficient need	3,733	24.6
Disability requirements not established	2,491	16.4
Failure to furnish necessary information or comply with agency policy	1,220	8.1
Age not established	22	0.1
Rejected for reasons other than points of eligibility given above	6,940	45.8
Voluntarily withdrew application	2,120	14.0
Died prior to approval	116	0.8
Moved out of state or could not be located	201	1.3
Transferred to other assistance	277	1.8
All other reasons	4,226	27.9

Of cases closed during this fiscal year, 15.8 per cent were closed because of death, and only 4.4 per cent because of improvement in the recipient's financial situation.

Table 40. Number of Medical Assistance Cases Closed by Reason for Closing, July 1978-June 1979

Reason for Closing	Number	Per Cent
All Cases Closed	18,354	100.0
Death	2,903	15.8
Decreased need:		
Obtainment of employment or increased earnings by either recipient or others in household and other economic reasons*	813	4.4
Receipt of OASDHI or other Federal or State benefits or pensions	1,041	5.7
Loss of eligibility for specified reasons other than decreased need:		
Living in public institution	209	1.1
Moved out of state or could not be located	1,339	7.3
Voluntary request of discontinuance	418	2.3
All other reasons for loss of eligibility	490	2.7
All other reasons**	11,141	60.7

* Includes increased support from persons outside household, and other resources of recipients, spouse, and other persons in household, which lessened need.

** Includes receipt of other types of aid and expiration of three month "spenddown" period.

PART V

SOCIAL SERVICES PROGRAM

A major function of the Missouri Division of Family Services is to provide social services under Titles IV-B, IV-C, and XX of the Social Security Act and under various State laws. The social service delivery system administered by the Division of Family Services is directed toward achievement of one or more of the following goals:

(1) Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependence;

(2) Achieving or maintaining self-sufficiency, including reductions or prevention of dependency;

(3) Preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitation or recruiting families.

(4) Preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care; or

(5) Securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions.

The following is a statistical summary of the number of clients open by goal at the end of the 1978-79 Fiscal Year:

(1)	Achieve or maintain economic self-support	14,064
(2)	Achieve or maintain self-sufficiency	91,246
(3)	Prevent or remedy abuse, neglect or exploitation	27,333
(4)	Prevent or reduce inappropriate institutionalization	15,667
(5)	Secure institutional care	407

The following services are available through Division of Family Services to eligible individuals to assist them in achieving one or more of these goals:

- Counseling
- Family planning
- Information and referral
- Investigation of abuse, neglect or exploitation
- Placement
- Service plan development
- Alternative care
- Day care for children
- Day care for adults
- Evaluation and diagnosis
- Home delivered or congregate meals
- In-home services
- Legal assistance
- Transportation
- Skill development
- Social development
- Detoxification
- Educational services
- Weatherization
- Half-way house

Eligible individuals include:

(1) Recipients of aid to families with dependent children, aid to families with dependent children in foster care, supplemental security income, or state supplemental payments.

(2) Individuals whose income does not exceed 68 per cent of the state median income as adjusted for family size.

(3) a. Any child or persons responsible for the child's care, custody or control or persons who otherwise affect the child's development and well-being on whom a report of abuse, or neglect, or exploitation has been made; or a child who has been identified as being at risk of abuse, neglect, or exploitation; or a runaway minor who has left his/her place of abode without consent of parent, guardian, or other person acting in the capacity of parent.

b. Individuals in the custody of the Division of Youth Services whose eligibility is determined on a group basis.

(4) Individuals requesting only information about or referral for services.

The following is a statistical summary of the number of clients open by eligibility category at the end of the 1978-79 Fiscal Year:

	Eligibility Category	Clients
(1)	Income Maintenance	56,455
(2)	Income Eligible Recipient (free)	62,868
(3)	Protective Service Recipient	23,423
(4)	Information and Referral Only Recipient	977

Special client groups within the above categories to whom services are directed are:

Crippled children
Developmentally disabled
Aged, blind, or emotionally disturbed
Public housing residents
Parents employed or in training
Physically handicapped
Alcohol and/or drug abuse
Adult offender
Juvenile offender
Ex-AFDC

The Division of Family Services provides services through either direct service delivery or purchase of service.

A. PURCHASE OF SERVICE (POS)

This program provides for the purchase of a varied range of social services statewide and local, public and private, proprietary and non-profit vendors under a contractual agreement for the purpose of serving a specified client population within a designated geographic area, at negotiated unit rate, in accordance with specified service standards.

Services Available:

Counseling
Family planning
Service plan development
Alternative care/residential treatment
Day care for adults
Day care for children
Evaluation and diagnosis
Home delivered or congregate meals
Legal assistance
Transportation
Skill development
Social development
Detoxification
Educational services
Winterization
Half-way house

Funding Sources:

A match of locally donated and/or State appropriated funds is used to obtain Federal Title XX funds.

The following are two specific purchase of service programs:

1. Vendor Day Care

The Vendor Day Care Program is a statewide program which provides for the purchase of day care services from qualified vendor agencies and individuals for children of Income Maintenance-AFDC recipients families where one or both caretaker relatives are employed or are in training for employment. During Fiscal Year 1979, an average of 4,459 children received vendor day care services each month.

Funding Sources:

A match of State appropriated funds with either Title XX or Title IV-C funds, depending on the client group.

2. Vendor In-Home Services

This is a statewide program which provides for the purchase of Homemaker and Chore Services from qualified vendor agencies at standardized rates for all eligible individuals and families in need of these services. The primary emphasis of this program is the provision of household maintenance and personal services to homebound elderly and families to assist them in achieving or maintaining self-sufficiency, to prevent or reduce inappropriate institutionalization of the elderly, or to prevent or reduce family breakup or unnecessary foster care placement of children in child abuse/neglect situations.

Funding Source:

A match of locally donated or State appropriated funds and Federal Title XX funds.

B. DIRECT SERVICE DELIVERY

This is a statewide service delivery program in which Division of Family Services employ social service staff to provide a range of case planning, investigative, counseling, and placement services to children and families for the purpose of preventing or remedying abuse, neglect, or exploitation of children, and for the preservation of rehabilitation of families with a potential or actual child abuse/neglect problem. A limited number of staff also provide treatment services in the area of adult abuse, neglect, and exploitation, and counseling and referral for AFDC clients in the area of family planning.

Funding Source:

A match of State appropriated funds and Federal funds under Title XX.

Major components of direct service delivery are the following:

1. Alternative Care

This is a statewide service program designed to provide substitute family care or non-familial group care for children who are determined by the juvenile court as needing care in a setting other than their natural family home. Alternative care may be provided in any one of three types of licensed foster settings: (1) foster family homes, (2) foster group facilities and (3) residential treatment facilities. Acceptance of any child referred by the court for placement is dependent on the availability of sufficient funds to pay the costs of care and the current availability of an appropriate care setting based on the child's individual alternative care needs.

Available services to children in alternative care settings always include room and board at standardized rates, an initial clothing allowance, payment of regular incidental expenses and medical expenses, and payment of special medically-related and non-medically-related expenses when these expenses are certified necessary to the child's care. In addition, a varied range of treatment services such as educational services and skill development services may be provided in behalf of children who are placed in residential treatment facilities.

During Fiscal Year 1979, there was an average of 5,384 children in foster care each month.

Funding Sources:

a. A match of State and Federal funds under Title IV-A for payment of room and board of AFDC eligible children alternative care setting. By statute, AFDC payments cannot exceed $100 per month per child.

b. A combination of State funds and Federal funds under Title IV-B for payment of the following alternative care costs:

   (1) Room and board for all non-AFDC eligible children in alternative care.

   (2) Supplemental payment to room and board costs for AFDC eligible children in alternative care.

   (3) Initial clothing expense.

   (4) Regular medical expense.

   (5) Special medically-related and non-medically related.

c. A match of State and Federal funds under Title XX for payment of the following alternative care costs:

(1) The first six months of room and board for children placed in a residential treatment facility.

(2) All treatment costs for the duration of a child's placement in a residential treatment facility.

2. Subsidized Adoption

This is a statewide program developed to provide financial benefits in the form of "subsidy payments" to encourage potential adoptive parents to adopt and finance the cost of adopting hard-to-place children. Beneficiaries of adoption subsidy include any child in adoptive placement who is determined to have been "previously unadoptable" because of a handicapping condition, racial or ethnic minority status, age, social maladjustment, or membership in a sibling group which was unadoptable.

One or all of the following types of subsidy payments may be made in behalf of a child in this program:

a. Regular monthly room and board payments of the same standardized rates as those for alternative care.

b. Recurring payment for treatment of a physically handicapping or other mental or emotional condition which existed at the time of placement.

c. A one-time special services payment to cover a non-recurring medical, dental, psychiatric or health expense, or an expense associated with the adoptive process.

Funding Source:

100 per cent State appropriated funds.

3. Unmarried Mother Services

This is a statewide service program which provides services and payments to young unmarried or separated mothers with an unwanted pregnancy.

Financial payments may be provided to or in behalf of these clients at standardized rates to assist them with the cost of living in any one of three types of settings: (1) independent living arrangement, (2) alternative care in a foster home, and (3) alternative care in a maternity home.

Additional services to these clients include counseling by Division of Family Services social services staff and payment of all medical care expenses incurred during pregnancy, delivery, and post-natal care.

During Fiscal Year 1979, there was an average of four unmarried mothers receiving payments in a given month. Additional mothers received services but no payments.

4. WIN

The WIN (Work Incentive) program provides supportive services to income maintenance recipients who are voluntarily or mandatorily registered in the WIN program because they are available for work or for work training. Services provided under this program are intended to contribute directly to immediate job placement of clients. This program is currently operated only in selected project areas within the State, including the major metropolitan and urban areas.

The WIN program is jointly administered by the Division of Employment Security and Division of Family Services who have joint responsibility for assessing registrant employability potential, appraising and certifying registrants, establishing the client employability plan, and providing social and employment services.

Approximately 85 per cent of the AFDC population in the State is in areas served by WIN projects. In Federal Fiscal Year 1979 there were 23,117 WIN registrations, 5,896 clients were actively worked with, and 5,666 received social services. In State Fiscal Year 1979 AFDC grant reductions due to WIN totalled $250,617.

Funding Sources:

A match of State and Federal funds under Title IV-C and under Title XX. Title XX funds are utilized in this program only if Title IV-C funds become exhausted during the fiscal year.

5. Investigation and Treatment of Child Abuse and Neglect

State statutes require the Division to investigate reports of child abuse and neglect.

Treatment services are provided to those families and children when abuse and neglect is substantiated.

In Fiscal Year 1979 an average of 21,949 individuals received services per month.

Funding Source:

A match of State appropriated funds and Federal funds under Title XX.

To assist in direct service delivery, there are the following support services:

1. Child Abuse/Neglect Central Registry

This registry is a support function for direct service delivery. It was established for the purpose of accepting reports of suspected or actual child abuse, neglect, or exploitation at a centralized confidential receiving station from any mandatory or permissive reports within the State of Missouri. Reports from the public are communicated to the Central Registry Unit for Child Abuse and Neglect via toll free telephone hotline which is manned by Division of Family Services staff on a 24-hour continuous basis.

The Central Registry Unit has the functions of maintaining a central file or registry of all reports of incidents of child abuse/neglect and transmitting each report made via the hotline to the appropriate Division of Family Services local office for investigation by Division of Family Services staff. The central registry serves as a source of historical data which is accessed each time a new report is received through the hotline. Any data regarding a previous report(s) which is found to be pertinent to a newly reported incident is transmitted to local staff responsible for performing the investigation. This is intended to serve as a resource for staff carrying out the investigation and to facilitate more fully informed case planning and service delivery to these clients.

All investigations must be performed within 24 hours after the report is referred to the local office by the Central Registry Unit, and the results of each investigation must then be transmitted back to the Central Registry Unit within this same 24-hour period so that the central registry can be updated. A final status report must be submitted to the Central Registry Unit by local Division of Family Services staff within (30) working days of the receipt of each initial report which identifies current dispositional information and services offered and accepted.

Statistical summary information is extracted from the central registry periodically to develop reports for the National Clearing House for Child Abuse/Neglect and for other state planning functions with regard to child abuse/neglect treatment and social service delivery.

In Fiscal Year 1979 the Child Abuse and Neglect "Hot Line"

received 24,641 reports involving 45,235 children. About 65 per cent of these reports were substantiated.

2. Interstate Compact on the Placement of Children

The Interstate Compact on the Placement of Children (ICPC) establishes a legal procedure to guarantee suitable care and protection of children in the custody of child-caring placing situations, who must be placed in an alternative care or adoption setting either out of state or internationally.

The Compact has been enacted by the State of Missouri and by a majority of other states. It provides for uniform child placement services and procedures by all compact member states, including the full investigation and evaluation of a proposed out-of-state placement to be communicated between state Compact Administrators via uniform documents prior to the child's actual placement. The process specified by the Compact is intended to ensure both a suitable placement environment and appropriate jurisdictional arrangements for each child involved in an interstate or international placement.

In calendar year 1979 Missouri processed 1,440 referrals through the Interstate Placement Office. Of these, 765 were requests for out-of-state placement, and 710 of these were approved. Also in calendar year 1979, Division of Family Services filled 640 service requests from other states for services in Missouri.

3. Foster Care Tracking

The purpose of Foster Care Tracking is to secure basic descriptive data on all children currently placed in an Alternative Care Foster Care Setting, and to follow the movement of each child who is involved in one or more placements. Statistical and other administrative reports are then generated as a result of demographic and placement data collected through an automated system and used for evaluating current alternative care placement trends, volumes, and characteristics of children entering alternative care.

During the 1978-79 Fiscal Year, 1,212 children in foster care were returned to their home after treatment services. As of June 30, 1979 there were 2,114 children under long term foster care and 5,606 children open for foster care at the end of 1978-79 Fiscal Year.

4. Adoption Exchange

The Adoption Exchange of Missouri (AEM) was established to facilitate the adoptive placement of children statewide by maintaining descriptive information regarding prospective adoptive children and parents in a centralized registry. Information contained in

the Exchange may be submitted by and shared among all licensed child-placing agencies who participate in the Exchange. Consent is obtained from or in behalf of all children and families who are registered within the Exchange, including the juvenile court if necessary. The Exchange serves only as an informational resource to cooperating adoption agencies, and does not attempt to supervise the legal process of social service delivery which pertains to individual adoptions. These functions remain the responsibility of the adoption placement agencies and the courts throughout the adoptive process.

There were 119 children registered in the Adoption Exchange of Missouri as being free for adoption at the end of the 1978-79 Fiscal Year. Of these children, all were considered to be hard to place, as defined, by having special needs. The Adoption Exchange of Missouri facilitated the placement of 77 children in adoption during Fiscal Year 1979. This was a placement rate of 45 per cent. For Division of Family Services as a whole, approximately 330 children were placed in an adoptive home. This was a decrease of 210 children, and was the result of a slowdown resulting from procedural requirements imposed by the new parental rights law, RSMo.210.

LICENSING OF CHILD CARE HOMES, AGENCIES, AND RESIDENTIAL HOMES

DAY CARE LICENSING

By Statute, the Missouri Division of Family Services is delegated the responsibility of licensing day care facilities which provide care to more than four children, and for establishing uniform regulations and standards to be met for licensing issuance. The standards are minimum standards as intended by Statute. The purpose of licensing is to give parents assurance that undue hazards do not exist, and that the child's daily experiences are conducive to wholesome growth and development. The investigation and supervision of day care facilities is done by designated day care licensing staff. Visits are made on a quarterly basis, on both an announced and unannounced basis, to assure that standards are being maintained. Consultation and technical assistance is also offered through the licensing process. The number of children in licensed child care is rapidly increasing in recent years. Particularly noticeable has been the increase in use of day care centers versus day care homes.

Table 41. Licensed Day Care Homes and Group Facilities, as of June 1979

Type of Day Care	Number of Facilities Licensed	Capacity of Licensed Facilities
TOTAL	1,502	32,467
Family Day Care Homes	986	6,760
Group Day Care Facilities	516	25,707
Voluntary	191	
Independent	325	

RESIDENTIAL LICENSING UNIT ACTIVITIES

Under the statutory authority of Sections 210.201 - 210.245, RSMo. 1969, the Residential Licensing Unit is responsible for the licensing of private facilities providing twenty-four hour care to dependent, neglected and emotionally disturbed children, including group homes and child caring agencies, and for the licensing of private child placing agencies providing foster and adoptive services. These licensed facilities are monitored through inspections conducted several times annually to insure maintenance of standards and compliance with the law and applicable rules. Enforcement is achieved through the licensing, denying and revocating process.

The unit is also responsible for the development, promulgation and issuance of uniform rules which establish standards of service and care to be rendered by the licensed agencies to children. Technical assistance and/or consultation is available through the Residential Licensing Unit to help achieve compliance and to upgrade the quality of services provided by the group homes, child caring and child placing agencies.

At present there are 77 licensed or approved residential facilities and 28 licensed or approved child placing programs or agencies, serving approximately 1,600 children. There are also approximately 400 foster homes inspected, approved and recommended for licensure by the child placing agencies, serving an additional 260 plus children.

These licensed facilities provide substitute care for dependent, neglected or abused children requiring periods of separation from their home settings. Children placed in residential care are referred by the juvenile courts or voluntarily by parent(s) or parent substitutes and are in need of care, treatment and other specialized services. Other children may need permanent placement through adoption and the child placing agencies provide these services to children.

PART VI

SERVICES FOR THE BLIND

In addition to providing financial assistance to blind persons in Missouri through the aid to the blind and blind pension programs, the Division of Family Services also administers four service programs for the blind. These are prevention of blindness, rehabilitation teaching, vocational rehabilitation, and services to blind children and their parents.

The prevention of blindness program provided for eye examinations to medically indigent persons for prevention of blindness and restoration of sight, through treatment or surgery.

As indicated in Table 42, a total of $174,645 was spent for services under the prevention of blindness program during the 1978-79 fiscal year. This was a decrease of $16,528 (8.6 per cent) under the previous year. The largest single item of cost was for purchase of glasses.

Table 42. Type of Services Provided by Prevention of Blindness by Amount of Expenditures, July 1978-June 1979

Type of Service	Amount
Total Expenditures	$174,645
Glasses	42,819
Hospitalization & surgery	91,950
Eye examinations & refractions	26,879
Artificial eyes	3,130
Drugs	4,718
Other*	5,149

* Includes physical examinations, tests, laboratory fees, X-rays, and other necessary medical procedures.

During the fiscal year a total of 2,775 services were provided. In addition, a total of 1,293 persons were examined at 19 clinics held throughout the state. There was a decrease of 2 examinations (0.15 per cent) over the preceding year. Examinations showed that glaucoma, cataract, diabetic retinopathy, and strabismus (in children) were the most prevalent eye conditions.

The types of services given by rehabilitation teachers are shown in Table 43. This shows that casework services is the most frequent service offered and was received by 959 persons during the year. Other leading services were adjustment to blindness received by 810 persons and distinguishing money by 169 persons. Referrals made by rehabilitation teachers during the year included 323 for library services, 59 for radio reading services, and 25 to vocational rehabilitation.

Table 43. Type of Instructions Given Under the Rehabilitation Teaching Program for the Blind, During Fiscal Year 1978-79

Type of Instruction	Number
Casework Service	959
Adjustment to Blindness	810
Library Services	323
Distinguishing Money	169
Mobility & Orientation	149
Needle Threading	147
Cooking	140
Script Writing	122
Braille Reading (Book I)	116
VR Aids Instruction	110
Telephone Dialing	83
Telling Time	78
Voting Laws Instruction	75
Therapeutic Crafts Instruction	46
White Cane Law Instruction	44
Labeling Instruction	43
Income Tax Law Instruction	38
Diabetic Information	37
Braille Writing Instruction	37
Cleaning	31
Postal Laws for the Blind	30
Sewing (Hand)	29
Guide Dog Laws Instruction	29
Table Techniques	27
Money Management	26
Recreation Skills	22
Laundering	20
Typing	20
Emergency Aid	17
Grooming	16
Child Care	12
Sewing (Machine)	9
Remedial Math	8
Remedial Reading	7
Remedial Spelling	6
Braille Music Code	3

Table 44 shows fiscal year statistics covering the rehabilitation teaching program. This shows that 785 cases were open for services at the beginning of the year and an additional 648 cases were accepted during the year, making a total of 1,433 active cases. Services were discontinued to 616 cases, leaving 817 active at the end of the year.

Table 44. Turnover Report on Rehabilitation Teaching Cases for the Blind, July 1978-June 1979

Item	Number
Total cases at beginning of fiscal year	785
Opened for service during year	648
Total cases during year	1,433
Total cases closed during year	616
Total cases at end of year	817

Persons rehabilitated to employment represents a savings in tax funds in that they become employed and self-supporting individuals who otherwise would be in need of assistance.

Table 45. Active Vocational Rehabilitation Cases for the Blind and Cases Closed from Active Load, July 1978-June 1979

Item	Number
Active cases on hand at beginning of year	808
Accepted for services during year	468
Total in active load during year	1,276
Total cases closed during year	331
Placed in employment	269
Closed other reasons - After rehabilitation plan initiated	38
Closed other reasons - Before rehabilitation plan initiated	24
Total active cases at end of year	945

Administration costs for vocational rehabilitation services totaled $1,384,847 or 54.7 per cent of total costs and went for salaries, travel, Social Security, and Missouri retirement costs.

Case services purchased for persons served totaled $1,146,932 or 45.3 per cent of total costs and including diagnostic and physical restoration services, training, maintenance, transportation and other services.

Table 46. Expenditures for Vocational Rehabilitation Services for the Blind, by Type of Expenditure, July 1978-June 1979

Type of Expenditure	Amount
TOTAL EXPENDITURES	2,531,779
Federal Share	2,077,976
State Share	453,803
Administration: (Total)	1,384,847
Salaries of Employees	901,651
Additions:	
Equipment	11,874
Repairs:	
Office Equipment	2,616
Supplies	14,152
Communications	16,755
Building and Ground Expense	58,608
Travel	81,155
Professional and Technical Services	51,617
Other Services	140,731
OASDI, Missouri Retirement and Insurance (Federal Fund Only)	105,688
Case Services Purchased for Clients	1,146,932

Under the Federal Randolph-Sheppard Act, a vending facility program was started in June 1945 as a part of vocational rehabilitation of the blind. Blind persons who meet the requirements of the above act may make applications to become vending facility operators. Equipment is supplied jointly from state and federal funds. Business Opportunities for Missouri Blind, Inc., which is sponsored by Missouri Lions Clubs, cooperates in the administration of this program.

At the end of the fiscal year there were 49 vending facilities with 46 blind operators. Total gross sales of the vending facilities amounted to $3,448,964 which was an increase of $111,542 over the previous fiscal year. Net income paid to operators totaled $773,532, an increase of $89,173 over the previous fiscal year. The average annual earnings of the vending facility operators was $14,902.

Professionally trained teacher/counselors provide services to pre-school blind children throughout Missouri. The purposes of services to visually impaired children and their parents is to offer individual counseling and educational programs and to coordinate community services in order that the pre-school blind child may acquire developmental skills and basic concepts to ready him for the regular educational process given to all children. For the blind children who cannot reach this optimum level of development these workers act as consultants to other educational opportunities so the child can reach the highest degree of development possible consistent with his level of progress at the age of six.

PART VII

CHILD SUPPORT ENFORCEMENT (IV-D)

The adoption of HB-601 July 1977 enabled Missouri to establish a Child Support Enforcement Program. Missouri was the last state in this country to adopt enabling legislation for Child Support Enforcement (IV-D). The primary purpose and the immediate result is a lower AFDC cost to the taxpayer. The secondary purpose of the program is to help children realize the right to receive support from their absent parent and the right to have their fathers identified so that support can be obtained. There are two distinct and separate programs operated by the Child Support Enforcement Unit. First, there is the program for clients who receive AFDC. The AFDC payee makes an assignment to the State of all past, present, and future child support. This assignment remains in effect until the AFDC case is closed. After the closing, it remains in effect for delinquent past child support. The State provides location, enforcement and collection services at no cost to the client while she receives AFDC payments. The child support is collected, submitted to the State, compared with the AFDC grant and distributed according to Federal regulations. To defray the cost of the AFDC program, 39.34 per cent of all AFDC child support collected is retained by the State. Any child support collected that exceeds the amount of AFDC payments is returned to the client when the AFDC case is closed.

A second program is provided for those parents who do not receive AFDC who apply for location, enforcement, and collection services through the Support Enforcement Program. These applicants are charged a fee based on a sliding scale according to their income. The child support is paid directly to the custodial parent and none of it is retained by the State.

The cost of administering this program is reimbursable at 75 per cent Federal funds and this cost is supported by collections from the AFDC-IV-D program. In other words, the cost of location, enforcement,and collection for the non-AFDC program is met through the amount of child support collected by the State in behalf of those clients who do receive AFDC.

The State is divided into four districts for the administration of the Child Support Enforcement Program.

DISTRICT I	St. Louis City
DISTRICT II	St. Louis County and 21 counties south which includes the Bootheel Area
DISTRICT III	43 Counties North of the Missouri River
DISTRICT IV	51 Counties in Southwest and South Central sections of the State

The amount of child support collected through the Child Support Enforcement Program is shown below by District totals and by State totals for the Fiscal Year 1979.

DISTRICT	TOTAL	AFDC	NON-AFDC
STATE TOTALS	$5,264,674.33	$3,897,473.73	$1,367,200.60
DISTRICT I	$ 641,353.16	$ 592,427,66	$ 48,925.50
DISTRICT II	$1,222,242.68	$1,026,310.15	$ 195,932.53
DISTRICT III	$2,367,899.18	$1,397,405.07	$ 970,494.11
DISTRICT IV	$1,033,179.31	$ 881,330.85	$ 151,848.46

Total IV-D collections in Fiscal Year 1979 increased over total collections in Fiscal Year 1978 by 99.13 per cent. Collections in the AFDC-IV-D only, in Fiscal Year 1979 increased over Fiscal Year 1978 by 56.19 per cent. The largest increase was in the Non-AFDC program. Non-AFDC collections increased in Fiscal Year 1979 over Fiscal Year 1978 by 820.73 per cent. These comparisons are shown in the table below.

	TOTAL	AFDC	NON-AFDC
Fiscal Year 1978	$2,643,865.80	$2,495,293.81	$ 148,571.99
Fiscal Year 1979	$5,264,674.33	$3,897,473.73	$1,367,200.60
INCREASE	99.13	56.19	820.73

The increase in Non-AFDC collections may be attributed to at least two major factors. First, these clients pay a small one-time fee for the services available through the Child Support Enforcement Program. Second, the child support payment is a direct source of income for them since they do not receive AFDC payments. A third reason for the increase in the Non-AFDC collections is that when an AFDC case is closed, the client can apply for Non-AFDC IV-D services and thus ensure receipt of the child support payment as income to the family.

The value of the Non-AFDC program lies in the fact that by providing Child Support Enforcement services for these clients, they are able to manage financially without receiving AFDC benefits from the State.

The Child Support Enforcement Unit has a major goal for Fiscal Year 1980 to collect $8,000,000 in child support payments.

PART VIII

SUMMARY OF EXPENDITURES AND SOURCES OF FUNDS

The last section of the 1978-79 report is devoted to a review and analysis of expenditures and the sources from which funds were received.

State appropriations are made for the fiscal year and are accordingly specific in the amount available during the fiscal year. Federal funds are appropriated on the basis of all grants, contributions or allotments received, and therefore the total amount of Federal funds available could not be determined until these funds were actually earned. For comparative purposes, the amounts of Federal funds available are considered to be the appropriation of Federal funds.

Federal matching funds are made available for payments to dependent children, and for payment for medical care for dependent children, aged, blind, and disabled recipients. The Federal participation for public assistance payments is at the rate of 60.36 per cent of matchable amounts.

The medical assistance program under Title XIX provides vendor payments to suppliers of medical care services and is matched separately from the cash assistance programs.

During the 1978-79 Fiscal Year, a total of $564.8 million in State and Federal funds was expended for assistance payments and administration, Table 47. This was an increase of $46.0 million (8.9 per cent) over the prior fiscal year.

Of total costs, $481.2 million or 85.2 per cent went for money payments to welfare recipients, vendor payments for medical care, foster care payments, aid to families with dependent children, work training, and day care costs. Of this total $282.8 million or 58.8 per cent were Federal funds and $198.4 million or 41.2 per cent were State and local funds.

Compared with the preceding fiscal year, Federal funds for assistance payments showed an increase of $27.3 million or 10.7 per cent, and State and local funds increased by $9.9 million or 5.2 per cent.

The largest increase in total assistance expenditures was for Medical Assistance (Title XIX plus Buy In) which totaled $249.8 million or an increase of $36.0 million (16.8 per cent). Expenditures for aid to dependent children totaled $145.9 million, a decrease of $0.5 million (0.4 per cent).

Table 47. Expenditures Charged Against All Funds for Assistance and Administration, Classified by Programs and Source of Funds, July 1, 1978-June 30, 1979

	Source of Funds			
	Total	Federal	State	Local
ALL EXPENDITURES	564,755,451	337,601,295	221,283,303	5,870,853
Assistance for Recipients	481,155,972	282,758,884	193,768,849	4,628,239
Aid to Families with Dependent Children	145,871,833	91,612,851	54,258,982	
Blind Pensions	602,400		602,400	
Adult Supplementation	12,338,942		12,338,942	
Blind Supplementation	3,303,386		3,303,386	
General Relief	3,435,531		3,381,753	53,778
Nursing Care-Other than Title XIX	18,978,058		18,978,058	
Homeless, Dependent, Neglected Children	5,638,943	1,167,265	4,471,678	
Residential Treatment for H.D.N.	4,008,986	3,006,740	1,002,246	
Purchase of Day Care	4,769,989	4,118,862	651,127	
Homemaker and Chore Services	3,174,932	2,399,366	775,566	
AFDC Work Training	348,730		348,730	
Purchase of Services - Expenditures to Organizations	26,403,238	22,331,921		4,071,317
Child Abuse and Neglect-Multi-Disciplinary Treatment	1,266,556	982,974	283,582	
Title XX Vendor Training	1,198,684	695,540		503,144
Medical Assistance, Title XIX	249,815,764	156,443,365	93,372,399	
Reimbursement Under Title IV-D, Child Support Enforcement	2,470,292	1,742,902	727,390	
Reimbursement to Counties	1,742,902	1,742,902		
Federal Reimbursement and Local Incentives	727,390		727,390	
Administrative Expense	81,129,187	53,099,509	26,787,064	1,242,614
Administration of:* Income Maintenance, Social Services, Medical Services and Administrative Services	70,457,464	43,757,972	25,456,878	1,242,614
Blind Administration & Services	2,812,878	1,972,288	840,590	
Title IV-D Child Support Enforcement	2,111,521	1,621,925	489,596	
OASDI, Mo. Retirement and Insurance (Federal Funds Only)	5,747,324	5,747,324		

* Percentage of Total Funds: Income Maintenance, 44 percent: Social Services, 35 percent: Medical Services, 4 percent: and Administrative Services, 17 percent.

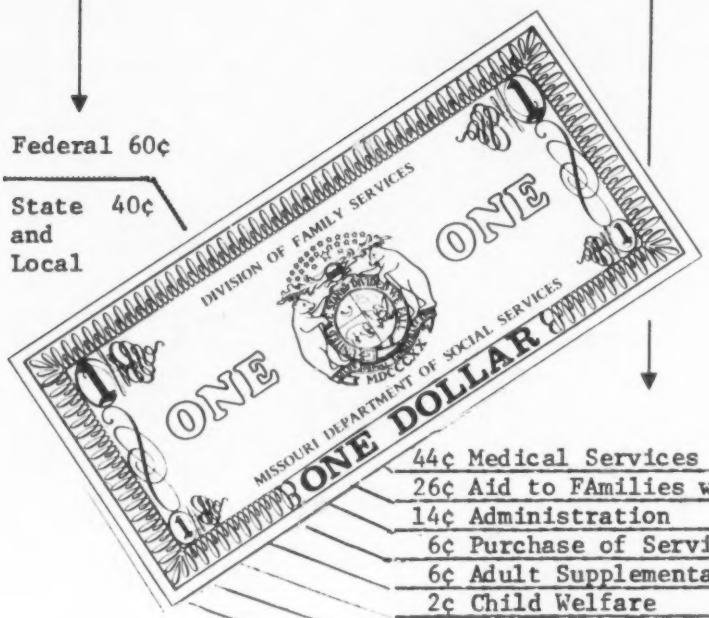
THE WELFARE DOLLAR

Fiscal Year July 1978-June 1979

Came from

Federal 60¢

State and Local 40¢

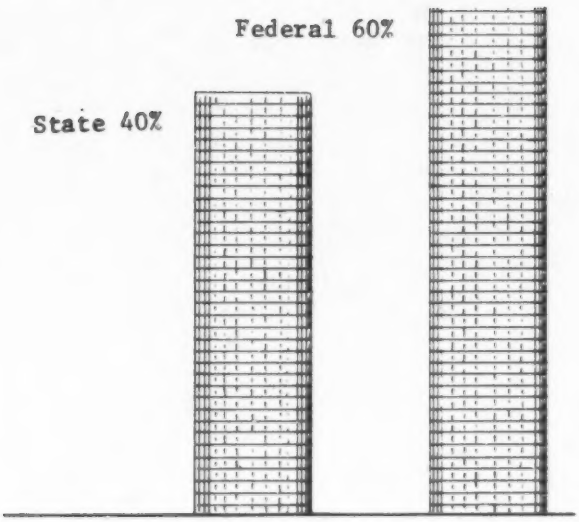


Was spent for

- 44¢ Medical Services
- 26¢ Aid to FAmilies with Dependent Children
- 14¢ Administration
- 6¢ Purchase of Services
- 6¢ Adult Supplementation
- 2¢ Child Welfare
- 1¢ General Relief
- 1¢ Blind Program

EXPENDITURE BY SOURCE OF FUNDS

Fiscal Year 1978-1979



Costs of administration by specific item of administration are given in Table 48. This shows total expenditures of $81.1 million which was an increase of $8.0 million (10.9 per cent) over the prior fiscal year.

Table 48. Administrative Costs by Object of Expense, July 1, 1978-June 30, 1979

Object of Expense	Total	General Administration	Child Support Enforcement	Blind
TOTAL	81,129,187	75,916,237	2,294,384	2,918,566
Salaries of Employees	61,261,788	58,550,657	1,615,249	1,095,882
Additions:				
Office and Operative Equipment	456,615	413,581	31,160	11,874
Repairs and Replacements:				
Building, Office and Operative Equipment	43,868	39,533	1,719	2,616
Supplies	1,360,888	1,314,845	31,891	14,152
Communications	2,967,327	2,751,276	199,296	16,755
Building and Ground Expense	3,255,686	3,063,356	131,852	60,478
Travel	2,518,771	2,337,043	73,982	107,746
Professional and Technical Services	1,839,681	1,757,047	25,017	57,617
Other Services	372,212	230,126	1,355	140,731
Case Services for the Blind	1,305,027			1,305,027
OASDI, Mo. Retirement and Insurance (Federal Fund Only)	5,747,324	5,458,773	182,863	105,688

Of the total costs of administration $61.3 million or 75.5 per cent went for staff salaries. This item showed an increase of $6.1 million or 12.3 per cent over the prior fiscal year. Other large expenditures were for OASDI and state retirement, $5.7 million: buildings and grounds expenses, $3.3 million: communications, $3.0 million: travel, $2.5 million: and professional and technical services, $1.8 million.

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APPENDIX A.

CHRONOLOGIES OF ACTIVITIES AFFECTING PROGRAMS

July 1, 1978	The 79th General Assembly of Missouri enacted legislation which permits direct payment to participating Durable Medical Equipment (DME) providers for services to Title XIX (Medicaid) eligible public assistance recipients. The program became effective July 1, 1978 and conforms to Title XIX of the Federal Social Security Act.
July 1, 1978	The AFDC percentage of need was increased from 65 per cent to 70 per cent effective this date.
August 13, 1978	House Bill 881 raised the blind pension maximum to $160.00. This new law became effective this date.
October 1, 1978	The following six counties have been added to the WIN program: Douglas, Howell, Oregon, Ozark, Shannon, and Texas.
November 15, 1978	A recent amendment to the Federal Age Discrimination in Employment Act prohibits mandatory retirement before age 70 solely because of age. The prohibition applies to state and local governments beginning January 1, 1979.
December 1, 1978	Final regulations covering the Food Stamp Act of 1977 received from U. S. Department of Agriculture. The major change is the elimination of the purchase requirement, effective January 1, 1979. Many other changes are being made.
January 2, 1979	Mr. John F. Pletz was appointed as Acting Director of the Division of Family Services. He will function in that capacity until such time as the Director of the Department of Social Services appoints a permanent Director for the Division of Family Services.
January 31, 1979	Governor Teasdale issued an executive order establishing a new Division of Aging within the Department of Social Services. The order transferred to the new division the duties and functions relating to services for the aged which were previously handled by the Division of Family Services.

March 7, 1979	As the result of a decision by the Missouri Court of Appeals, no relatives other than spouse, minor child and parent of minor child will be included in determining eligibility for General Relief.
April 1, 1979	To meet Federal reporting requirements and qualify for Federal funding, Department of Health, Education, and Welfare required the Division to conduct a social services time study from April through June 1979. This study measured the time spent on the various services delivered to different client groups.
April 1, 1979	The Indochinese Refugee Assistance Program has been reinstated in Missouri as of April 1, 1979. Refugees from Vietnam, Cambodia, and Laos may be eligible for this assistance.
April 30, 1979	Announcement that the Missouri Medicaid Management Information System (MMIS) will be implemented on August 1, 1979, and EDS Federal will begin operating the claims processing portion of the Medicaid program on the same date.
May 14, 1979	Effective July 1, 1979, Social Security (RSDI) benefits will be increased by 9.9 per cent and Supplemental Security Income (SSI) will be increased to $208.20 for an individual and $312.30 for a couple.
May 14, 1979	Every other year Department of Health, Education and Welfare requires that each State will do an Aid to Families with Dependent Children Characteristics Study. The study consisted of a sample of 479 cases active in March 1979.
May 14, 1979	Mr. John G. Hall has been appointed as the Deputy Director of the Medical Services Section.
May 24, 1979	Mr. John Zumwalt was appointed Director of the Missouri Division of Family Services. He officially assumed the office on June 10, 1979.
June 11, 1979	The AFDC percentage of need payable effective July 1, 1979 is 74 per cent.
June 11, 1979	Effective July 1, 1979, the total property maximum is being raised from $10,500 to $20,500 for AFDC and GR claimants for NC, MA and SP claimants whose eligibility is based on the OAA or PTD criteria.

June 18, 1979

Senate Bill 493 becomes law on July 1, 1979. In addition to adding a licensed boarding home grant with a maximum of $120 for eligible individuals 21 years and over to the Nursing Care program, it also increased the maximum grants for eligible individuals 21 years and over to $225 if living in a licensed domiciliary home and $300 if living in a licensed practical home or a professional home when the recipient does not qualify for vendor payments.

APPENDIX B.

SUPPLEMENTARY

STATISTICAL

TABLES

Table I. Average Monthly Number of Recipients Under Programs Administered by the

County	AFDC		
	Families	Children	Persons
STATE TOTAL	65,044	133,693	193,340
Adair	137	250	382
Andrew	66	122	180
Atchison	47	84	124
Audrain	190	358	525
Barry	189	368	536
Barton	45	84	116
Bates	120	248	350
Benton	96	180	267
Bollinger	95	210	312
Boone	642	1,201	1,777
Buchanan	1,028	1,981	2,926
Butler	773	1,575	2,281
Caldwell	42	75	110
Callaway	213	395	573
Camden	145	260	392
Cape Girardeau	443	834	1,232
Carroll	115	230	325
Carter	76	153	219
Cass	259	452	678
Cedar	88	168	250
Chariton	95	185	265
Christian	154	298	432
Clark	49	107	159
Clay	603	1,044	1,568
Clinton	95	164	247
Cole	256	451	680
Cooper	113	196	288
Crawford	211	424	624
Dade	34	77	107
Dallas	99	191	276
Daviess	46	96	140
DeKalb	36	69	98
Dent	193	378	553
Douglas	101	192	280
Dunklin	950	2,052	2,924
Franklin	482	941	1,410
Gasconade	50	106	147
Gentry	43	72	110
Greene	1,944	3,733	5,526
Grundy	77	137	206
Harrison	77	138	212
Henry	163	329	485
Hickory	57	109	162
Holt	49	92	132
Howard	114	236	335
Howell	286	532	796
Iron	128	248	387
Jackson	10,868	22,122	32,111
Jasper	865	1,633	2,443
Jefferson	922	1,611	2,452
Johnson	201	358	532
Knox	27	50	76
Laclede	278	545	792
Lafayette	192	344	507
Lawrence	200	420	612
Lewis	82	156	229
Lincoln	119	234	339

Division of Family Services, by Program and by County, July 1978-June 1979

GR		BP	ABS	NC	SSI-SP	SP
Cases	Persons	Cases	Cases	Cases	Cases	Cases
4,128	4,324	321	802	8,243	25,535	8,591
9	9		4	60	118	15
9	9		4	46	63	16
1	1		1	26	36	10
11	11	7	6	69	128	33
12	12	3	6	87	253	61
2	2	2	5	3	85	13
6	6	2	4	47	113	39
9	10	1		18	65	13
12	12	2	1	27	162	32
28	29	3	11	44	218	70
110	116	9	20	112	346	168
83	87	1	10	32	639	151
3	3	3	1	28	78	21
9	9	6	4	44	119	19
14	16	7	4	27	116	23
30	31	5	8	88	266	100
15	16		6	24	80	16
16	17		2	1	102	20
4	4		5	60	86	26
10	10	1	3	4	112	22
15	16	2		69	91	25
9	11		2	35	144	15
4	6	1	1	1	48	8
40	41	2	7	131	220	91
7	7		4	103	61	24
15	15	5	2	52	149	52
1	1		3	69	86	28
22	23		2	23	162	60
1	1		1	1	85	11
10	11	1	2	1	165	28
7	8		2	11	75	17
1	1		2		40	18
20	23	3	2	24	175	29
8	9	2	2	1	172	25
65	68		11	3	840	163
21	21	8	15	67	196	62
6	6	2	2	28	63	13
1	1			12	79	12
130	139	13	25	323	787	266
6	6	1	3	1	90	14
7	7			3	115	11
22	23	1	2	64	139	43
5	6		1	1	76	7
4	6		2	36	73	19
5	6	1	1	68	109	28
15	19	4	9	25	375	66
11	12		1	9	129	29
481	490	54	127	1,098	1,770	733
79	87	21	24	284	593	228
20	20	8	17	300	218	125
7	7	5	6	100	76	25
3	3			6	42	11
21	23	1	5	23	265	46
3	3	1	1	83	111	33
22	24	2	7	17	234	59
5	6	1	6	76	45	17
6	6	1	2	92	87	29

Table 1. Average Monthly Number of Recipients Under Programs Administered by the

County	AFDC		
	Families	Children	Persons
Linn	112	236	338
Livingston	119	214	322
McDonald	168	357	510
Macon	71	124	183
Madison	135	273	402
Maries	49	103	145
Marion	285	555	812
Mercer	25	47	71
Miller	155	293	427
Mississippi	633	1,428	1,992
Moniteau	51	103	146
Monroe	64	119	176
Montgomery	103	193	288
Morgan	92	167	249
New Madrid	825	1,827	2,584
Newton	258	511	740
Nodaway	96	177	260
Oregon	101	212	306
Osage	40	73	109
Ozark	86	151	227
Pemiscot	1,107	2,822	3,805
Perry	80	160	233
Pettis	410	767	1,152
Phelps	265	509	750
Pike	172	342	510
Platte	205	362	543
Polk	132	252	374
Pulaski	288	538	793
Putnam	20	37	57
Ralls	33	66	100
Randolph	215	416	614
Ray	135	234	345
Reynolds	74	143	215
Ripley	226	476	709
St. Charles	691	1,217	1,880
St. Clair	114	228	337
St. Francois	531	997	1,507
Ste. Genevieve	86	173	256
St. Louis	6,903	13,066	19,303
St. Louis City	21,656	48,106	68,137
Saline	207	396	575
Schuyler	31	60	88
Scotland	9	19	26
Scott	773	1,600	2,305
Shannon	97	198	291
Shelby	46	95	134
Stoddard	360	742	1,068
Stone	80	157	230
Sullivan	64	127	185
Taney	164	280	428
Texas	194	401	575
Vernon	204	395	590
Warren	99	181	273
Washington	348	732	1,099
Wayne	160	312	458
Webster	130	250	368
Worth	28	47	66
Wright	171	329	477

Division of Family Services, by Program and by County, July 1978-June 1979

GR		BP	ABS	NC	SSI-SP	SP
Cases	Persons	Cases	Cases	Cases	Cases	Cases
10	11	1	4	18	155	54
6	6	3	6	123	134	38
27	31	1		41	131	26
8	8		2	3	126	20
7	7		4	21	115	30
3	4	1	1		66	17
23	24	4	2	159	172	59
6	6				47	9
24	25	1	5	2	137	30
54	58	1	4		371	95
3	3	3	6	49	79	14
6	6	1	4	84	73	19
13	15	1	1	57	67	12
5	5	2	2	4	115	32
46	50		9	5	501	121
18	18	1	4	3	244	43
6	7	1		37	118	27
5	6	1	4		210	28
2	2		4	25	73	13
13	17	1	3		129	19
55	58	1	11	4	651	133
5	5	2	4	2	79	20
23	24	2	10	122	240	69
15	16	4	6	62	172	57
17	18		6	128	100	39
9	9			80	52	21
13	13	2	8	61	202	28
21	23		4	36	143	29
			1	8	53	5
2	2	1	3	17	55	17
14	15		3	116	154	53
7	8		1	3	71	22
8	8				118	22
24	28	1	3		226	59
35	39	2	13	68	144	91
16	18	1			118	12
44	51	4	12	149	272	105
7	7		4	20	35	17
136	142	41	49	1,225	976	679
1,636	1,670	28	124	754	4,198	2,237
20	22	2	5	127	146	68
			1	19	48	3
1	1			2	36	4
31	32	1	11	76	409	149
4	5		2	1	126	25
7	8		1	74	76	19
66	75	1	13	48	456	157
5	5		1	2	134	29
8	10	3	6	105	105	6
15	17		3	58	132	43
4	4		4	21	221	45
32	35	6	9	28	164	56
4	4			41	78	28
34	39	1	5	15	167	65
8	9		4	3	214	39
7	10	2	2	25	237	30
3	3			2	27	6
9	10	1	4	23	267	60

Table II. Cash Payments Extended to Recipients Under Programs Administered by the

County	Total All Programs	AFDC	GR
STATE TOTAL	181,076,061	143,032,898	3,355,896
Adair	473,800	290,013	7,474
Andrew	299,626	141,878	6,998
Atchison	171,077	90,764	770
Audrain	628,198	378,237	8,320
Barry	712,428	381,304	9,667
Barton	144,819	92,685	1,610
Bates	439,315	252,917	4,662
Benton	298,407	214,837	7,861
Bollinger	362,870	216,973	9,133
Boone	1,563,592	1,294,569	22,986
Buchanan	2,832,222	2,237,106	90,573
Butler	2,141,397	1,672,191	67,437
Caldwell	198,802	89,456	2,215
Callaway	580,428	401,769	6,047
Camden	439,578	293,998	11,949
Cape Girardeau	1,314,882	908,092	25,080
Carroll	352,497	247,874	11,218
Carter	231,828	167,350	11,883
Cass	731,911	530,171	3,640
Cedar	253,016	178,180	8,464
Chariton	377,478	184,184	11,313
Christian	461,713	314,086	8,057
Clark	145,574	116,889	4,624
Clay	1,729,910	1,220,642	32,787
Clinton	454,136	176,750	4,688
Cole	748,286	514,005	11,782
Cooper	429,255	221,773	700
Crawford	623,612	468,978	16,150
Dade	110,881	77,518	304
Dallas	307,037	210,920	8,517
Daviess	157,402	95,291	6,084
DeKalb	96,461	73,940	1,120
Dent	566,737	410,442	15,841
Douglas	284,678	201,990	7,123
Dunklin	2,522,886	2,092,046	47,112
Franklin	1,344,938	1,044,449	16,564
Gasconade	207,746	102,051	3,894
Gentry	135,148	74,941	686
Greene	5,537,835	4,191,737	106,368
Grundy	200,034	155,939	4,692
Harrison	197,991	145,460	5,296
Henry	584,055	342,222	17,705
Hickory	157,923	121,681	2,869
Holt	221,978	94,752	2,593
Howard	427,527	214,165	3,856
Howell	855,173	603,519	14,153
Iron	379,027	286,618	9,818
Jackson	28,002,924	23,620,649	392,195
Jasper	2,922,281	1,813,103	65,362
Jefferson	2,846,022	1,950,327	15,511
Johnson	718,925	417,101	5,004
Knox	87,505	52,213	2,170
Laclede	781,103	580,199	16,924
Lafayette	619,254	376,775	2,399
Lawrence	604,261	424,558	18,738
Lewis	385,174	169,689	4,304
Lincoln	524,431	253,255	4,247

Division of Family Services, by Program and by County, July 1978-June 1979

BP	ABS	NC	SSI-SP	SP
601,780	1,287,161	18,668,908	9,247,275	4,882,143
	7,651	115,628	43,232	9,802
	5,912	109,918	29,331	5,589
	1,638	62,450	12,729	2,726
13,570	10,381	162,107	41,434	14,149
4,810	9,357	204,127	78,105	25,058
3,260	8,544	7,200	26,101	5,419
3,310	5,755	111,315	35,575	25,781
1,870	384	41,678	21,233	10,544
2,990	1,760	64,986	51,263	15,765
6,250	21,032	101,169	85,998	31,588
17,360	32,163	224,911	137,232	92,877
1,870	16,269	72,355	223,631	87,644
6,140	1,600	66,408	22,991	9,992
11,670	5,629	97,069	44,210	14,034
13,140	6,091	63,471	37,275	13,654
9,450	12,977	202,590	106,913	49,780
430	9,168	56,376	22,963	4,468
	2,818	1,400	37,233	11,144
640	6,620	138,253	34,547	18,040
2,030	4,309	8,372	36,646	15,015
3,740		139,539	27,742	10,960
	3,256	82,988	43,215	10,111
1,870	1,999	2,942	13,619	3,631
3,580	12,426	301,257	94,512	64,706
	7,383	234,134	20,138	11,043
9,030	3,580	120,314	59,055	30,520
	4,371	160,024	31,497	10,890
	2,865	51,722	54,905	28,992
	1,495	1,600	26,118	3,846
1,390	3,490	564	59,189	22,967
480	2,780	24,524	20,199	8,044
	3,740	600	12,430	4,631
4,860	3,565	56,104	62,451	13,474
3,605	2,907	2,800	53,199	13,054
	17,924	4,218	292,765	68,821
14,690	22,940	148,330	66,398	31,567
3,605	3,046	63,256	24,790	7,104
	160	28,334	24,021	7,006
24,700	40,359	750,938	276,980	146,753
1,870	3,464	598	28,496	4,975
	700	6,642	33,726	6,167
2,140	3,569	151,840	40,715	25,864
	2,205	2,400	24,602	4,166
	2,350	85,519	25,866	10,898
1,870	954	145,560	43,571	17,551
7,480	11,637	44,076	138,430	35,878
	1,901	20,239	44,623	15,828
100,820	208,772	2,532,629	707,913	439,946
40,380	39,064	653,792	203,357	107,223
14,715	25,002	674,108	83,972	82,387
9,980	8,664	236,007	29,527	12,642
		12,088	14,817	6,217
1,870	8,395	52,864	98,746	22,105
1,760	2,160	180,927	38,856	16,077
4,355	10,198	38,111	81,911	26,390
2,190	8,422	178,863	15,586	6,120
1,735	2,677	214,582	33,039	14,896

Table II. Cash Payments Extended to Recipients Under Programs Administered by the

County	Total All Programs	AFDC	GR
Linn	354,012	215,950	8,213
Livingston	616,135	227,392	4,484
McDonald	544,473	367,964	24,946
Macon	203,277	135,545	6,139
Madison	402,941	285,989	5,525
Maries	141,287	102,519	3,220
Marion	1,088,220	605,774	19,693
Mercer	73,736	50,574	4,663
Miller	403,829	312,877	18,503
Mississippi	1,628,877	1,400,149	43,149
Moniteau	263,540	101,323	2,049
Monroe	367,892	124,150	5,320
Montgomery	381,072	219,006	11,303
Morgan	256,965	186,162	4,225
New Madrid	2,136,043	1,829,492	35,546
Newton	674,514	548,145	14,175
Nodaway	326,872	182,876	5,381
Oregon	318,448	229,630	4,949
Osage	171,801	77,051	1,239
Ozark	253,247	181,102	12,320
Pemiscot	2,897,790	2,551,909	43,260
Perry	221,853	166,228	4,130
Pettis	1,276,446	839,076	18,088
Phelps	817,239	552,349	11,750
Pike	761,420	380,259	13,984
Platte	645,150	415,411	7,446
Polk	522,030	274,277	9,515
Pulaski	788,032	610,595	18,353
Putnam	77,993	39,270	210
Ralls	139,687	61,675	1,463
Randolph	835,761	458,772	11,795
Ray	300,437	256,538	5,259
Reynolds	218,613	163,501	6,523
Ripley	638,914	496,977	21,623
St. Charles	1,821,813	1,480,397	28,525
St. Clair	304,882	244,424	11,888
St. Francois	1,679,093	1,137,544	35,776
Ste. Genevieve	272,371	188,251	5,600
St. Louis	18,673,613	14,646,574	109,635
St. Louis City	56,663,676	50,540,160	1,335,190
Saline	821,374	417,505	16,281
Schuyler	127,928	68,975	
Scotland	35,662	17,365	840
Scott	2,100,171	1,638,183	24,050
Shannon	253,376	191,406	3,461
Shelby	299,578	95,182	5,116
Stoddard	1,147,554	738,892	52,001
Stone	236,987	170,973	3,669
Sullivan	449,775	136,866	7,729
Taney	547,998	328,415	13,647
Texas	532,707	400,960	3,335
Vernon	621,666	424,368	25,954
Warren	370,009	208,530	2,693
Washington	955,817	800,149	28,043
Wayne	456,854	335,634	7,420
Webster	424,570	277,338	7,536
Worth	58,668	43,472	2,017
Wright	543,379	355,607	7,510

Division of Family Services, by Program and by County, July 1978-June 1979--Continued

BP	ABS	NC	SSI-SP	SP
1,870	6,675	42,577	48,112	30,615
5,610	10,860	290,541	50,577	26,671
1,280		98,880	38,744	12,659
	4,180	5,928	41,867	9,618
	7,710	49,334	40,233	14,150
1,870	2,435	554	23,158	7,531
6,890	4,380	338,487	68,519	44,477
		200	15,320	2,979
1,870	6,053	2,964	46,470	15,092
1,870	5,769	348	134,163	43,429
4,650	10,217	114,643	25,106	5,552
1,870	6,396	197,811	23,499	8,846
935	2,272	114,309	26,252	6,995
2,990	2,672	7,656	38,339	14,921
	12,199	10,206	173,531	75,069
1,870	6,304	6,354	75,793	21,873
1,870		83,101	40,096	13,548
1,440	4,600	150	65,125	12,554
	4,621	57,374	25,622	5,894
2,300	3,826	572	43,271	9,856
2,620	13,026	7,130	215,105	64,740
4,270	6,551	3,480	26,695	10,499
3,790	16,468	280,765	75,451	42,808
8,280	9,051	120,382	80,803	34,624
480	11,078	304,474	38,577	12,568
		188,712	20,103	13,478
3,040	12,300	137,704	73,035	12,159
	6,223	84,101	48,972	19,788
	858	18,533	16,386	2,736
1,120	4,740	39,780	24,237	6,672
	5,322	272,218	53,890	33,764
	1,672	5,683	21,481	9,804
			40,385	8,204
1,870	3,926	138	78,752	35,628
4,270	22,853	153,575	65,543	66,650
1,870			39,953	6,747
7,185	22,150	326,573	89,593	60,272
160	8,280	48,058	10,732	11,290
77,700	81,128	2,873,586	409,064	475,926
52,580	199,620	1,531,162	1,648,048	1,356,916
2,830	7,554	297,315	49,611	30,278
	1,606	44,400	11,851	1,096
		4,600	11,007	1,850
1,440	17,751	181,715	166,398	70,634
	2,701	2,347	42,489	10,972
	1,645	159,680	28,264	9,691
2,720	20,074	109,454	153,565	70,848
	1,870	4,800	40,207	15,468
5,980	11,987	250,613	32,396	4,204
135	3,646	137,067	45,604	19,484
	5,721	37,494	66,250	18,947
11,700	14,914	62,018	54,825	27,887
		96,896	41,558	20,332
1,870	7,968	34,186	53,688	29,911
	6,864	5,650	75,867	25,419
2,780	2,110	47,098	75,064	12,644
	123	3,800	6,721	2,535
2,400	5,434	54,916	91,690	25,822

Table III. Amount of Cash and Vendor Payments Expended Under Programs

County	Total All Programs		
	Total	Cash	Vendor
STATE TOTAL	414,847,319*	181,076,061	233,771,258*
Adair	1,602,575	473,800	1,128,775
Andrew	888,996	299,626	589,370
Atchison	665,204	171,077	494,127
Audrain	1,770,009	628,198	1,141,811
Barry	1,438,704	712,428	726,276
Barton	687,394	144,819	542,575
Bates	1,454,474	439,315	1,015,159
Benton	832,561	298,407	534,154
Bollinger	770,320	362,870	407,450
Boone	4,096,381	1,563,592	2,532,789
Buchanan	7,471,843	2,832,222	4,639,621
Butler	5,739,731	2,141,397	3,598,334
Caldwell	465,419	198,802	266,617
Callaway	1,233,911	580,428	653,483
Camden	996,417	439,578	556,839
Cape Girardeau	2,779,076	1,314,882	1,464,194
Carroll	616,798	352,497	264,301
Carter	911,190	231,828	679,362
Cass	1,423,224	731,911	691,313
Cedar	1,298,091	253,016	1,045,075
Chariton	1,113,783	377,478	736,305
Christian	819,568	461,713	357,855
Clark	603,592	145,574	458,018
Clay	3,550,913	1,729,910	1,821,003
Clinton	736,109	454,136	281,973
Cole	1,900,882	748,286	1,152,596
Cooper	770,089	429,255	340,834
Crawford	1,431,581	623,612	807,969
Dade	519,853	110,881	408,972
Dallas	1,235,817	307,037	928,780
Daviess	445,584	157,402	288,182
DeKalb	533,757	96,461	437,296
Dent	1,738,358	566,737	1,171,621
Douglas	1,046,137	284,678	761,459
Dunklin	7,168,087	2,522,886	4,645,201
Franklin	3,364,189	1,344,938	2,019,251
Gasconade	559,339	207,746	351,593
Gentry	674,368	135,148	539,220
Greene	11,859,446	5,537,835	6,321,611
Grundy	928,530	200,034	728,496
Harrison	612,794	197,991	414,803
Henry	1,935,835	584,055	1,351,780
Hickory	319,082	157,923	161,159
Holt	550,798	221,978	328,820
Howard	899,982	427,527	472,455
Howell	2,123,952	855,173	1,268,779
Iron	1,440,447	379,027	1,061,420
Jackson	55,514,204	28,002,924	27,511,280
Jasper	6,306,964	2,922,281	3,384,683
Jefferson	4,418,994	2,846,022	1,572,972
Johnson	1,110,703	718,925	391,778
Knox	340,071	87,505	252,566
Laclede	2,061,694	781,103	1,280,591
Lafayette	2,113,752	619,254	1,494,498
Lawrence	2,337,638	604,261	1,733,377
Lewis	569,480	385,174	184,306
Lincoln	1,324,953	524,431	800,522

* State Totals include payments for Buy In, Mental and TB Hospitals and ICF-Mentally Retarded.

Administered by the Division of Family Services, July 1978-June 1979

County	Total All Programs		
	Total	Cash	Vendor
Linn	1,317,020	354,012	963,008
Livingston	1,116,958	616,135	500,823
McDonald	983,138	544,473	438,665
Macon	1,037,516	203,277	834,239
Madison	897,033	402,941	494,092
Maries	297,979	141,287	156,692
Marion	1,965,280	1,088,220	877,060
Mercer	389,010	73,736	315,274
Miller	1,137,435	403,829	733,606
Mississippi	3,978,192	1,628,877	2,349,315
Moniteau	747,236	263,540	483,696
Monroe	566,063	367,892	198,171
Montgomery	838,352	381,072	457,280
Morgan	1,103,558	256,965	846,593
New Madrid	4,919,345	2,136,043	2,783,302
Newton	1,692,977	674,514	1,018,463
Nodaway	1,172,982	326,872	846,110
Oregon	1,327,092	318,448	1,008,644
Osage	356,518	171,801	184,717
Ozark	552,993	253,247	299,746
Pemiscot	6,179,260	2,897,790	3,281,470
Perry	1,368,366	221,853	1,146,513
Pettis	2,956,861	1,276,446	1,680,415
Phelps	2,151,661	817,239	1,334,422
Pike	1,279,206	761,420	517,786
Platte	1,068,153	645,150	423,003
Polk	1,402,334	522,030	880,304
Pulaski	1,437,473	788,032	649,441
Putnam	281,833	77,993	203,840
Ralls	259,575	139,687	119,888
Randolph	1,421,226	835,761	585,465
Ray	863,867	300,437	563,430
Reynolds	482,570	218,613	263,957
Ripley	1,905,274	638,914	1,266,360
St. Charles	4,743,331	1,821,813	2,921,518
St. Clair	1,140,758	304,882	835,876
St. Francois	3,776,486	1,679,093	2,097,393
Ste. Genevieve	766,995	272,371	494,624
St. Louis	36,072,056	18,673,613	17,398,443
St. Louis City	100,853,478	56,663,676	44,189,802
Saline	1,469,820	821,374	648,446
Schuyler	472,353	127,928	344,425
Scotland	330,438	35,662	294,776
Scott	4,205,341	2,100,171	2,105,170
Shannon	1,148,254	253,376	894,878
Shelby	653,263	299,578	353,685
Stoddard	3,599,659	1,147,554	2,452,105
Stone	484,576	236,987	247,589
Sullivan	749,359	449,775	299,584
Taney	1,535,361	547,998	987,363
Texas	1,685,467	532,707	1,152.760
Vernon	1,911,779	621,666	1,290,113
Warren	581,261	370,009	211,252
Washington	1,852,934	955,817	897,117
Wayne	1,572,905	456,854	1,116,051
Webster	1,122,297	424,570	697,727
Worth	222,311	58,668	163,643
Wright	1,342,407	543,379	799,028

Table IV. Medical Assistance Cases and Payments,

	Total		Physicians' Services**		Drugs	
	Unduplicated Cases	Payments *	Cases	Payments	Cases	Payments
STATE TOTAL	356,427	202,794,807	267,424	22,007,041	244,878	20,898,293
Adair	1,163	1,128,775	820	84,740	730	82,888
Andrew	621	589,370	495	34,473	454	51,045
Atchison	459	494,127	340	26,791	332	39,371
Audrain	1,422	1,141,811	1,181	112,301	1,056	111,625
Barry	1,776	726,276	1,479	118,406	1,339	148,379
Barton	576	542,575	447	30,635	413	54,792
Bates	1,162	1,015,159	975	93,452	865	105,334
Benton	817	534,154	696	56,330	595	61,270
Bollinger	1,087	407,450	923	73,661	896	110,712
Boone	3,695	2,532,789	3,002	281,788	2,065	156,402
Buchanan	6,588	4,639,621	5,318	502,298	4,592	381,458
Butler	5,991	3,598,334	5,349	571,335	4,573	590,663
Caldwell	457	266,617	383	28,316	339	46,021
Callaway	1,533	653,483	1,284	99,375	936	62,789
Camden	1,127	556,839	995	87,482	890	90,922
Cape Girardeau	2,821	1,464,194	2,195	186,607	2,056	208,477
Carroll	806	264,301	656	51,531	585	48,011
Carter	781	679,362	673	65,652	579	78,796
Cass	1,588	691,313	1,231	100,693	1,005	80,846
Cedar	1,020	1,045,075	857	63,553	786	102,102
Chariton	882	736,305	725	55,680	680	74,554
Christian	1,237	357,855	982	82,059	885	69,393
Clark	520	458,018	433	33,205	367	46,918
Clay	3,856	1,821,003	2,865	239,265	2,452	227,593
Clinton	805	281,973	642	49,914	568	67,243
Cole	1,856	1,152,596	1,474	142,176	1,285	116,885
Cooper	856	340,834	726	61,857	625	84,867
Crawford	1,726	807,969	1,456	122,861	1,290	128,829
Dade	415	408,972	276	23,218	325	48,840
Dallas	1,060	928,780	897	81,940	865	127,131
Daviess	498	288,182	419	33,878	362	40,572
DeKalb	384	437,296	285	23,139	282	34,722
Dent	1,531	1,171,621	1,297	104,904	1,193	141,591
Douglas	1,118	761,459	917	68,872	862	100,383
Dunklin	7,188	4,645,201	6,142	505,861	5,828	745,535
Franklin	3,077	2,019,251	2,522	187,629	2,194	193,372
Gasconade	556	351,593	442	28,458	398	44,679
Gentry	506	539,220	435	33,432	385	37,983
Greene	12,018	6,321,611	9,708	932,850	8,431	737,477
Grundy	739	728,496	561	44,264	571	65,477
Harrison	640	414,803	533	36,918	438	39,701
Henry	1,595	1,351,780	1,326	105,531	1,209	132,315
Hickory	471	161,159	407	33,140	340	35,373
Holt	495	328,820	386	30,170	394	39,324
Howard	988	472,455	835	69,732	723	74,496
Howell	2,335	1,268,779	1,997	163,723	1,843	221,745
Iron	1,186	1,061,420	1,026	81,137	973	116,256
Jackson	48,410	27,511,280	33,762	3,073,168	29,472	1,860,164
Jasper	6,505	3,384,683	5,171	481,347	4,676	486,711
Jefferson	4,960	1,572,972	3,839	285,389	3,325	228,642
Johnson	1,216	391,778	996	70,557	784	68,964
Knox	297	252,566	247	21,269	217	24,690
Laclede	2,108	1,280,591	1,825	161,231	1,562	155,450
Lafayette	1,488	1,494,498	1,262	100,522	1,034	114,198
Lawrence	1,969	1,733,377	1,565	145,147	1,462	154,045
Lewis	613	184,306	439	30,259	399	33,673
Lincoln	1,031	800,522	753	61,510	779	81,039

* Total does not include $5,734,781 for Mental Hospital, $96,956 for TB Hospital, $18,682,100 for ICF-Mentally Retarded and $6,462,859 for Buy In.

by Type of Service and by County, July 1976-June 1979

Dental Services		Inpatient Hospital		Outpatient Hospital		Skilled and Intermediate Care Facilities	
Cases	Payments	Cases	Payments	Cases	Payments	Cases	Payments
80,955	7,962,872	74,975	71,606,528	173,124	9,467,181	16,902	70,852,892
350	43,659	296	346,861	627	42,815	122	527,812
87	10,418	111	97,900	103	4,204	101	391,330
92	7,576	109	91,698	140	7,446	95	321,245
197	13,756	381	268,624	596	22,293	139	613,212
353	32,259	472	254,006	548	29,592	42	143,634
98	7,680	118	66,958	195	10,439	99	372,071
185	24,462	349	257,301	569	28,390	120	506,220
204	23,252	174	104,651	256	12,464	81	276,187
307	38,636	221	153,990	406	23,213	2	7,238
717	58,740	714	726,614	1,858	85,494	254	1,223,751
1,654	196,250	1,555	1,399,207	2,819	141,958	484	2,018,450
1,326	121,941	1,816	1,537,621	2,712	155,710	168	621,064
65	5,955	84	46,908	142	7,263	30	132,154
285	21,284	314	226,175	722	29,309	91	214,551
221	19,872	268	182,143	327	15,449	53	160,971
579	50,988	536	473,852	954	53,875	115	490,395
220	24,453	186	123,129	323	17,177		
219	16,736	214	149,338	314	17,681	74	351,159
341	30,796	292	258,088	588	26,665	59	194,225
186	19,382	245	119,180	383	17,281	226	723,577
197	18,798	189	106,410	321	15,579	127	465,284
357	38,020	220	141,765	377	25,236	4	1,382
134	12,662	109	96,119	148	5,757	79	263,357
911	85,962	669	665,095	1,370	71,663	147	531,425
216	20,864	148	128,477	235	11,618	4	3,857
371	33,358	436	359,697	847	36,454	95	464,026
159	12,608	181	163,544	367	17,958		
368	33,334	375	266,271	677	34,448	61	222,226
57	6,429	84	45,604	130	9,817	88	275,064
272	24,617	196	172,251	381	39,203	121	483,638
106	11,307	78	53,510	131	7,079	56	141,836
77	6,586	87	64,397	99	7,562	105	300,890
344	45,621	370	222,453	720	34,165	107	622,887
170	16,070	225	125,858	244	15,380	121	434,896
1,894	247,624	1,757	1,256,176	3,638	223,327	361	1,666,678
586	43,773	600	511,162	1,225	72,144	228	1,011,171
84	6,132	100	68,675	196	10,558	76	193,091
89	11,665	105	46,666	145	5,673	128	403,801
3,777	487,564	2,535	2,087,420	4,344	234,259	534	1,842,041
128	9,346	231	139,682	315	12,117	123	457,610
191	27,298	117	66,684	232	12,315	76	231,887
321	34,218	301	192,258	611	24,893	207	862,565
135	18,741	103	65,156	162	8,749		
96	8,587	100	63,458	96	5,704	48	181,577
204	24,573	227	134,470	389	19,709	39	149,475
470	45,408	555	375,293	876	42,095	102	420,515
201	17,574	285	224,784	563	28,239	128	593,430
12,704	1,087,922	9,229	12,189,934	25,841	1,644,753	1,628	7,655,339
1,692	206,476	1,494	1,174,881	2,779	153,470	228	881,798
1,191	116,728	963	837,452	2,075	99,387	7	5,374
237	18,615	198	169,311	467	23,815	41	40,516
79	10,152	61	40,389	105	4,627	35	151,439
520	57,992	571	354,412	857	39,361	131	512,145
229	22,321	297	218,656	510	20,337	230	1,018,464
427	51,349	491	346,444	691	34,210	244	1,002,182
134	18,552	106	81,132	248	10,236	13	10,454
168	11,886	259	166,029	380	15,905	121	464,153

** Physicians' Services include X-ray and Laboratory Services; Outpatient Hospital includes Ambulance Services, Home Health Services and Optometric Services.
(Payment columns do not add to totals due to rounding off.)

Table IV. Medical Assistance Cases and Payments,

County	Total		Physicians' Services		Drugs	
	Unduplicated Cases	Payments	Cases	Payments	Cases	Payments
Linn	1,214	963,008	954	69,198	922	105,319
Livingston	1,182	500,823	977	66,310	818	96,301
McDonald	1,395	438,665	1,201	94,306	1,012	102,612
Macon	841	834,239	686	67,102	622	74,507
Madison	1,006	494,092	911	91,897	805	83,765
Maries	447	156,692	356	28,209	343	34,238
Marion	2,102	877,060	1,652	130,053	1,342	111,706
Mercer	292	315,274	236	19,669	224	25,948
Miller	1,220	733,606	1,062	93,160	956	90,312
Mississippi	4,197	2,349,315	3,756	301,792	3,548	443,600
Moniteau	655	483,696	584	53,311	533	63,767
Monroe	684	198,171	593	41,391	519	61,523
Montgomery	851	457,280	736	59,252	647	64,943
Morgan	923	846,593	829	69,986	739	83,285
New Madrid	5,262	2,783,302	4,633	364,905	4,221	429,850
Newton	1,963	1,018,463	1,510	145,569	1,425	124,353
Nodaway	898	846,110	695	56,314	656	72,884
Oregon	1,255	1,008,644	1,072	85,262	1,083	151,535
Osage	412	184,717	309	29,041	306	31,761
Ozark	768	299,746	598	52,710	574	63,457
Pemiscot	7,148	3,281,470	6,210	498,443	5,667	548,635
Perry	863	1,146,513	658	47,524	614	75,356
Pettis	2,902	1,680,415	2,417	211,492	2,004	170,315
Phelps	2,159	1,334,422	1,773	149,478	1,623	137,133
Pike	1,308	517,786	1,065	83,362	973	90,424
Platte	1,286	423,003	826	70,045	745	62,776
Polk	1,492	880,304	1,262	116,185	1,132	135,930
Pulaski	1,607	649,441	1,383	104,544	1,249	91,259
Putnam	301	203,840	223	18,572	247	30,027
Ralls	357	119,888	286	21,753	224	20,210
Randolph	1,656	585,465	1,481	134,988	1,215	113,263
Ray	880	563,430	652	53,990	624	61,829
Reynolds	691	263,957	615	48,276	531	61,454
Ripley	1,977	1,266,360	1,746	157,128	1,515	191,970
St. Charles	3,987	2,921,518	3,334	279,257	2,542	171,862
St. Clair	971	835,876	802	73,093	732	79,959
St. Francois	3,942	2,097,393	3,300	271,787	2,998	338,193
Ste. Genevieve	702	494,624	581	45,460	514	44,713
St. Louis	30,339	17,398,443	20,245	1,507,879	19,090	1,278,267
St. Louis City	85,174	44,189,802	53,891	3,836,144	54,564	2,990,734
Saline	1,667	648,446	1,284	118,070	1,155	110,574
Schuyler	358	344,425	309	25,961	279	33,527
Scotland	208	294,776	171	15,619	149	23,079
Scott	4,899	2,105,170	4,139	337,092	3,710	372,547
Shannon	950	894,878	792	63,895	769	95,931
Shelby	512	353,685	401	30,269	395	42,052
Stoddard	3,700	2,452,105	3,353	280,163	3,047	427,707
Stone	742	247,589	576	50,703	548	59,600
Sullivan	765	299,584	681	52,842	625	64,376
Taney	1,278	987,363	1,048	99,140	974	99,029
Texas	1,707	1,152,760	1,516	123,440	1,348	140,579
Vernon	1,869	1,290,113	1,524	134,665	1,285	148,696
Warren	634	211,252	469	34,415	441	39,723
Washington	2,393	897,117	1,995	149,025	1,792	157,892
Wayne	1,554	1,116,051	1,396	134,478	1,233	175,919
Webster	1,350	697,727	1,139	87,988	1,008	118,017
Worth	231	163,643	207	16,131	162	19,610
Wright	1,676	799,028	1,452	128,677	1,296	146,727

by Type of Service and by County, July 1978-June 1979—Continued

Dental Services		Inpatient Hospital		Outpatient Hospital		Skilled and Intermediate Care Facilities	
Cases	Payments	Cases	Payments	Cases	Payments	Cases	Payments
290	32,491	292	136,883	509	20,010	158	599,107
267	16,992	233	157,148	482	16,091	34	147,981
247	20,679	311	203,236	423	17,163	3	667
134	15,709	232	133,496	370	14,327	138	529,098
195	16,992	320	265,770	539	26,499	4	9,169
99	9,642	112	73,283	166	10,676	1	544
468	54,931	471	440,324	758	33,036	30	107,010
83	6,997	77	56,320	148	7,298	41	199,042
186	15,793	267	250,913	413	24,177	75	259,251
1,167	144,411	810	528,093	1,697	95,948	207	835,471
103	9,081	148	96,261	270	12,516	58	248,760
147	12,717	139	74,164	154	6,673	3	1,703
122	9,998	184	154,051	239	11,516	43	157,520
141	11,434	166	138,556	256	12,580	138	530,752
1,086	119,288	1,101	741,803	2,287	123,615	225	1,003,841
368	38,149	397	303,079	539	35,799	106	371,514
173	14,658	231	186,045	375	14,593	108	501,616
202	24,221	284	171,876	431	25,024	147	550,726
98	11,963	94	102,224	171	9,378	1	350
149	12,848	176	117,475	220	14,624	12	38,632
1,491	150,271	1,738	1,077,903	3,520	216,684	172	789,534
220	22,790	206	135,064	469	21,544	193	844,235
751	94,014	682	457,672	1,343	63,904	134	683,018
533	49,614	530	361,891	1,000	42,017	170	594,289
156	22,158	278	229,824	406	21,704	19	70,314
333	29,975	195	233,229	474	26,978		
319	35,858	254	145,004	370	22,157	116	425,170
373	45,049	387	374,514	611	33,801	2	274
27	1,184	77	79,491	108	5,167	27	69,399
63	6,062	80	67,326	110	4,537		
339	38,175	425	267,885	767	29,189	5	1,965
143	12,185	160	153,499	375	22,945	68	258,982
143	12,182	168	126,918	304	14,169	4	958
403	46,702	467	357,703	857	47,047	105	465,810
789	72,751	769	831,391	1,618	93,643	316	1,472,614
193	20,949	275	186,224	433	30,379	106	445,272
704	68,215	937	792,077	1,672	74,778	157	552,343
172	15,726	123	108,019	326	14,108	76	266,598
6,903	659,126	5,435	6,148,783	15,173	779,703	1,680	7,024,685
18,529	1,669,881	17,293	20,668,536	54,454	2,954,576	2,503	12,069,931
323	33,472	400	355,047	619	30,594	1	689
73	7,815	77	49,269	130	6,058	57	221,795
52	6,149	54	46,303	120	5,593	46	198,033
1,178	114,666	1,075	708,010	2,250	113,609	110	459,246
237	21,600	226	137,216	343	20,351	103	555,885
86	7,197	112	75,863	165	5,825	50	192,479
731	77,336	801	522,634	1,418	80,108	262	1,064,157
149	15,379	169	99,979	281	21,831	1	97
192	16,849	231	140,093	396	25,163	2	261
350	44,026	299	211,563	559	29,788	108	503,817
368	41,258	342	247,210	697	36,800	123	563,473
322	32,363	416	311,023	867	32,526	160	630,840
114	8,047	141	118,009	205	11,058		
585	64,776	579	455,680	1,289	69,157	3	587
300	23,512	358	234,253	578	35,378	110	512,511
255	29,802	230	147,194	311	23,112	75	291,614
33	4,039	48	25,760	49	2,039	33	96,064
316	23,898	386	281,148	636	41,098	75	177,480

Table V. Number of Recipients Under Programs Administered

Month and Year	Total - All Types of Assistance		AFDC		
	Cases	Persons	Families	Children	Persons
1978-1979					
June	109,422	234,190	63,265	128,792	187,807
May	109,938	236,422	64,020	130,473	190,310
April	110,389	237,448	64,150	130,925	191,003
March	110,968	238,634	64,276	131,469	191,735
February	110,378	237,120	63,607	130,662	190,150
January	111,476	239,264	64,239	131,949	191,841
December	111,565	238,876	63,956	131,759	191,085
November	112,352	240,459	64,337	132,831	192,264
October	113,787	243,728	65,269	135,149	195,017
September	115,053	245,633	66,147	136,980	196,538
August	117,954	250,725	68,673	141,547	201,241
July	118,405	251,190	68,527	141,693	201,091
1977-1978					
June	119,513	254,614	68,928	143,081	203,803
May	120,659	257,724	69,820	145,332	206,648
April	120,614	257,749	69,565	145,601	206,473
March	122,904	262,882	70,961	148,760	210,709
February	122,458	261,390	70,298	148,030	209,014
January	123,737	263,725	70,921	149,576	210,681
December	126,080	268,818	72,575	153,371	215,066
November	126,211	268,484	72,491	153,987	214,532
October	128,726	273,131	74,033	157,469	218,163
September	130,779	277,070	75,500	160,773	221,487
August	131,461	277,055	75,785	162,405	221,066
July	135,405	284,263	78,142	167,437	226,674

1/ For monthly data prior to 1977, see the Annual Report of the Division of Family Services.
Data subject to adjustment.

by the Division of Family Services, July 1977-June 1979 1/

GR		BP	NC	ABS	SSI-SP	SP
Cases	Persons					
4,287	4,513	363	8,329	837	24,153	8,188
4,085	4,279	348	8,091	814	24,339	8,241
4,086	4,292	333	8,066	814	24,604	8,336
4,060	4,267	321	8,182	812	24,925	8,392
3,942	4,141	318	8,109	808	25,136	8,458
3,986	4,172	325	8,212	817	25,381	8,516
4,030	4,212	321	8,224	811	25,624	8,599
4,045	4,225	311	8,300	797	25,887	8,675
4,138	4,331	310	8,360	792	26,147	8,771
4,206	4,395	301	8,344	776	26,424	8,855
4,249	4,452	293	8,320	760	26,719	8,940
4,385	4,606	276	8,310	780	27,057	9,070
4,465	4,691	270	8,344	804	27,535	9,167
4,439	4,676	270	8,362	805	27,703	9,260
4,384	4,611	262	8,306	796	27,934	9,367
4,608	4,838	270	8,456	805	28,319	9,485
4,497	4,713	268	8,366	807	28,617	9,605
4,590	4,818	268	8,395	810	28,986	9,767
4,745	4,992	266	8,446	828	29,312	9,908
4,619	4,851	261	8,293	947	29,640	9,960
4,945	5,220	264	8,352	953	30,050	10,129
5,029	5,333	262	8,412	954	30,368	10,254
5,005	5,318	260	8,377	936	30,707	10,391
5,425	5,751	260	8,977	955	31,042	10,604

Table VI. Amount of Cash Expended Under Programs Administered (Exclusive of Vendor

Month and Year	Total	AFDC	GR
TOTAL (1978-1979)	181,076,061	143,032,898	3,355,896
June	14,769,231	11,605,406	293,528
May	14,868,456	11,757,208	276,826
April	14,916,845	11,801,114	276,740
March	14,961,387	11,813,908	274,762
February	14,814,105	11,681,017	267,021
January	14,946,392	11,782,678	269,690
December	14,899,547	11,725,245	272,900
November	15,002,591	11,807,691	273,565
October	15,203,834	11,981,463	280,515
September	15,333,581	12,100,892	285,161
August	15,684,289	12,502,155	287,981
July	15,675,803	12,474,121	297,207
TOTAL (1977-1978)	180,348,406	140,276,364	3,861,274
June	14,798,244	11,566,313	303,113
May	14,940,541	11,693,004	301,760
April	14,883,793	11,643,663	297,381
March	15,155,019	11,854,380	313,356
February	14,989,319	11,701,429	305,991
January	15,038,572	11,725,140	311,896
December	15,207,126	11,857,730	322,384
November	15,014,604	11,689,255	313,483
October	15,124,843	11,745,607	337,848
September	15,188,543	11,778,016	343,613
August	14,858,596	11,449,975	340,624
July	15,149,206	11,571,852	369,825

1/ For monthly data prior to 1977, see the Annual Report of the Division of Family Services. (Data rounded to nearest dollar and subject to adjustment.)

by the Division of Family Services, July 1977-June 1979 1/
Medical Care)

BP	NC	ABS	SSI-SP	SP
601,780	18,668,908	1,287,161	9,247,275	4,882,143
58,400	1,573,380	115,185	733,007	390,325
56,040	1,534,718	111,862	738,304	393,498
53,600	1,530,058	111,781	745,674	397,878
51,680	1,553,868	111,610	755,563	399,996
51,280	1,537,557	110,973	762,795	403,462
52,440	1,553,846	112,493	769,104	406,141
51,800	1,552,642	111,803	775,136	410,021
50,085	1,565,208	110,119	782,864	413,059
49,925	1,574,819	109,139	790,509	417,464
48,485	1,570,448	106,712	799,313	422,570
40,315	1,563,287	86,372	792,030	412,149
37,730	1,559,077	89,112	802,976	415,580
436,946	18,886,751	1,185,080	10,382,778	5,319,213
36,920	1,567,658	91,267	815,543	417,430
36,985	1,573,218	90,986	822,442	422,146
35,840	1,562,080	89,617	828,815	426,397
36,938	1,588,686	90,583	839,751	431,325
36,733	1,568,822	90,869	848,621	436,854
36,798	1,570,766	91,203	858,980	443,789
36,528	1,577,701	94,055	868,725	450,003
35,918	1,545,042	107,775	877,084	446,047
36,388	1,553,819	109,255	889,687	452,239
36,118	1,563,449	109,539	900,488	457,320
35,890	1,550,103	108,391	910,860	462,753
35,890	1,665,407	111,540	921,782	472,910

Table VII. Amount of Medical Assistance Expended Under Programs Administered

Month and Year	Total All Services	Physicians' Services	Drugs	Skilled Nursing Home	Intermediate Care Facility
TOTAL (1978-1979)	202,794,562	21,719,456	20,898,288	1,723,677	69,129,212
June	18,681,993	1,754,423	1,439,876	182,487	6,609,159
May	18,824,136	1,693,101	2,128,754	170,098	6,433,630
April	21,117,913	2,399,251	1,713,210	140,216	6,466,474
March	14,139,525	1,630,217	1,533,562	120,504	5,374,163
February	20,270,930	2,776,739	1,869,786	132,005	6,200,427
January	16,561,455	1,444,181	1,965,138	136,628	5,753,479
December	14,633,910	1,095,155	1,711,804	134,313	5,420,221
November	16,577,310	1,670,650	1,732,217	155,870	5,640,893
October	16,103,270	1,918,330	1,753,773	155,546	5,370,209
September	15,232,031	1,669,549	1,657,276	110,804	5,342,000
August	15,867,229	1,866,432	1,715,574	147,672	5,363,707
July	14,784,860	1,801,428	1,677,318	137,534	5,154,850
TOTAL (1977-1978)	173,639,458	21,152,249	20,418,549	1,896,300	53,772,573
June	15.255,320	1,507,060	1,696,331	125,140	5,062,241
May	15,952,719	1,930,213	1,833,588	125,782	4,992,614
April	16,729,743	1,955,041	1,725,768	137,123	5,089,106
March	14,179,683	1,805,934	1,828,498	145,354	4,484,849
February	13,982,476	1,589,403	1,701,202	139,196	4,664,660
January	14,027,669	1,728,745	1,796,841	129,738	4,500,744
December	13,572,470	1,444,454	1,577,786	136,178	4,312,422
November	14,644,024	2,084,239	1,773,875	173,035	4,459,296
October	13,586,645	1,927,526	1,625,754	158,062	4,133,902
September	14,249,447	1,618,609	1,492,800	233,822	4,619,185
August	15,567,958	1,982,288	1,846,600	215,148	4,769,847
July	11,891,304	1,578,737	1,519,506	177,722	2,683,707

1/ For monthly data prior to 1977, see the Annual Report of the Division of Family Services. (Data rounded to nearest dollar and subject to adjustment. Totals do not include payments for Buy In, Mental and TB Hospitals and Intermediate Care Facilities-Mentally Retarded.)

by the Division of Family Services, by Type of Service and by Month, July 1977-June 1979 1/

Inpatient Hospital	Outpatient Hospital	Dental Services	X-ray and Laboratory	Ambulance Services	Home Health Services	Optometric Services
71,606,532	6,255,342	7,962,714	287,569	307,124	534,375	2,370,273
6,906,545	248,983	1,176,430	30,645	35,435	45,666	252,344
7,050,302	246,145	750,447	38,098	23,734	60,514	229,313
8,319,800	747,245	908,628	39,936	30,456	72,948	279,749
4,252,462	454,653	537,321	21,426	22,879	27,386	164,952
7,888,263	576,161	543,080	25,868	26,913	64,734	166,954
5,672,759	573,089	711,073	23,816	27,743	36,809	216,740
4,983,275	492,840	527,967	12,954	16,489	32,161	206,731
5,913,672	540,581	640,678	17,464	25,234	33,058	206,993
5,375,054	560,569	654,984	15,776	25,485	42,968	230,576
5,053,648	615,032	509,041	23,050	25,562	35,727	190,342
5,334,677	609,914	579,894	22,365	24,121	53,200	149,673
4,856,075	590,130	423,171	16,171	23,073	29,204	75,906
63,185,026	6,294,711	5,545,122	184,329	289,967	301,441	599,191
5,690,407	584,856	438,980	22,618	29,811	42,681	55,195
5,977,687	525,627	429,864	26,708	31,156	23,964	55,516
6,618,455	562,279	503,976	20,360	31,832	24,985	60,818
4,901,392	533,348	366,432	13,371	25,652	31,538	43,315
4,903,040	528,309	359,893	12,539	25,186	17,697	41,351
4,879,187	472,993	404,074	14,450	22,696	28,392	49,809
5,086,577	488,268	451,836	8,681	17,045	14,934	34,289
5,039,541	516,250	481,809	11,993	23,151	24,089	56,746
4,853,457	434,873	357,453	12,611	17,072	30,165	35,770
5,310,834	443,180	424,036	11,191	21,922	15,565	58,303
5,212,570	708,399	732,503	14,288	24,444	13,086	48,785
4,711,879	496,329	594,266	15,519	20,000	34,345	59,294